

MuckRock News
DEPT MR 77235
411A Highland Ave
Somerville, MA 02144-2516
77235-71540028@requests.muckrock.com

Webb County Sheriff
Texas Public Information Act Office
902 Victoria Street
Laredo, TX 78040

July 16, 2019

To Whom It May Concern:

Pursuant to the Texas Public Information Act, I hereby request the following records:

All marketing, training, instructional, or other documents, including emails, pertaining to ANDURIL INDUSTRIES and/or the company's LATTICE technology. Please constrain your search to the following date range: Jan 1 2018 - July 12 2019.

The requested documents will be made available to the general public, and this request is not being made for commercial purposes.

In the event that there are fees, I would be grateful if you would inform me of the total charges in advance of fulfilling my request. I would prefer the request filled electronically, by e-mail attachment if available or CD-ROM if not.

Thank you in advance for your anticipated cooperation in this matter. I look forward to receiving your response to this request within 10 business days, as the statute requires.

Sincerely,

Sam Biddle

Filed via MuckRock.com
E-mail (Preferred): 77235-71540028@requests.muckrock.com

For mailed responses, please address (see note):
MuckRock News
DEPT MR 77235
411A Highland Ave
Somerville, MA 02144-2516

PLEASE NOTE: This request is not filed by a MuckRock staff member, but is being sent through MuckRock

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 624.16

Prepared By: Linda Jo Santos

Request No.: RT19-050

Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Martin Cuellar

S.S. # Last 4 digits XXX-XX-6534

Address 902 Victoria Street, Laredo Tx

Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 to 3/28/2019
San Antonio, Tx

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Federico Garza Jr.

Printed Name & Signature of
Department Head

Date 3/01/2019

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Martin Cuellar

Printed Name & Signature of
Claimant

Date

3/30/19 3/13

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

GENERAL QUESTIONS:

Date and time of departure 3/25 2019 2:30 p.m.

Date and time of return 3/27/2019 10:00 p.m.

Number of employees on trip 6

Will airline flight be involved in this travel? No

Will a County vehicle be used in the travel? Yes

Will a rental vehicle be used in the travel? No

(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____

= _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2	Breakfasts @ \$10 each = \$ 20.00
1	Lunches @ \$14 each = \$ 14.00
2	Dinners @ \$16 each = \$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

_____ \$ _____
_____ \$ _____

TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED

\$ 624.16

RECEIVED
2019 MAR - 7 PM 3:00
WEBCOUNTY BUSINESS OFFICE
Form AP02 Revised 01/15

Monday, March 25

- | | |
|------------------------|---|
| 10:00am - 5:00pm | Registration Open |
| 1:15pm (Shotgun Start) | Border Patrol Foundation's 7th Annual Family Services Golf Tournament |

Tuesday, March 26

- | | |
|-------------------|--|
| 7:30am - 5:00pm | Registration Open |
| 8:30am - 9:15am | Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement (Confirmed) |
| 9:15am - 10:15am | Plenary Panel: National Vetting Center: What Is It? What Isn't It? And How Will It Change the Way We Protect the Homeland? |
| 10:15am - 10:45am | Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard (Invited) |
| 11:00am | Exhibit Hall Ribbon Cutting & Coffee Break In the Exhibit Hall |
| 11:00am - 5:00pm | Exhibit Hall Open |
| 12:30pm - 1:30pm | Networking Lunch in the Exhibit Hall |
| 1:30pm - 2:30pm | Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts |
| 2:30pm - 3:00pm | Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection (Invited) |
| 3:00pm - 4:00pm | Plenary Panel: Border Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization |
| 4:00pm - 5:00pm | Networking Reception In the Exhibit Hall |
| 6:00pm - 9:00pm | Border Patrol Foundation's 4th Annual "Night at the Alamo" |



Linda J. Santos

From: Hampton Confirmed <noreply@h4.hilton.com>
Sent: Tuesday, March 5, 2019 2:11 PM
To: Linda J. Santos
Subject: Your Mar-25-2019 Confirmation #83922081



**MARTIN CUELLAR, Join
Hilton Honors**

sign up

**MARTIN CUELLAR,
see you on Mar-25-2019**



Your Upcoming Stay

Hampton Inn San Antonio-Downtown (River Walk Area)
414 Bowie Street
San Antonio TX 78205, US
T: +1 2102258500

Confirmation #83922081

Mon

25

March

Check In: 4:00PM

Wed

27

March

Check Out: 11:00AM



Your Room Information

KING STUDY-NON SMOKING

Rooms: 1

Guests: 1 Adult

Plan ahead by making an Arrival Request.

Order Now

Your Rate Information

SEMI-FLEX

Rate Per Night:

Mar-25-2019 - Mar-27-2019

239.04 USD

Total for Stay per Room Rate:

478.08 USD

Taxes

80.08 USD

Total for Stay

558.16 USD



Your Stay Benefits



Experience Dining



Your On Site Amenities



Explore Neighborhood

Alamo

enterprise

National

fill up on points

for a limited time, earn up to
7,500 bonus points on car rentals

GET STARTED

FIND NEW EXPERIENCES
DURING YOUR UPCOMING STAY

EXPLORE NOW

travel
that delivers

2K Points per stay +
10K your way. Repeat.
now through May 5

Rate Rules and Cancellation Policy

- Your reservation is guaranteed for late arrival.
- If your plans change please let us know - it's free to cancel or update your reservation by 11:59pm local hotel time on Mar-21-2019

Comments & Requests | Additional Information

: See Group Notes CX House + 2 days:



We are a smoke-free hotel

Tax

16.75% Per Room Per Night

Self Parking: 20.00 USD

Hilton



Please do not reply to this email, as mail sent to this address cannot be answered. If you have questions please visit our [Customer Support](#) page and select the applicable contact method.

Disclaimer: Room interior varies by hotel and the room booked may differ from room shown in this email.

[Click here](#) to see Hilton's policy regarding firearms on hotel premises

*Standard Wi-Fi is free for Hilton Honors members. Premium, if available, has a fee (except for Diamond members). Wi-Fi access is not free in meeting spaces or at properties with a resort charge.

** Service of alcoholic beverages is subject to state and local laws. Must be of legal drinking age. Hilton Requests Upon Arrival™ items are subject to availability.

† Visit [Hilton.com/guarantee](#) to learn more about our Best Price Guarantee.

Using a debit/credit card to check in? A hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through date of check-out. Holds may not be released for 72 hours from date of check-out or longer at the discretion of your card issuer. [Click here](#) if you need to modify or cancel your reservation.

Any change to your arrival or departure date or room type is subject to hotel availability and may result in a possible rate change or additional fee. Changes also may not be possible at a later date. Please [click here](#) to see all rules and restrictions.

This message and any attachments may contain confidential information. If it has been sent to you in error or if you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-4HONORS (446-6677), or [click here](#).

Hilton Honors™ membership and redemption of Points are subject to [Hilton Honors Terms and Conditions](#)

This email was delivered to LJSANTOS@WEBBCOUNTYTX.GOV. [Click here to unsubscribe](#). Unsubscribing from all marketing emails will prevent you from receiving news, offers and information from us. You can continue to check your account by logging into your profile or by calling 1-800-4HONORS. Outside the United States and Canada, please dial + 800 44 45 86 67 for assistance.

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Hilton Reservations and Customer Care | 2050 Chenault Drive | Carrollton, Texas 75006, USA

2019_R03_B02_NMKT_0TR_V33_MULTIBR_H03_ML

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 11:34 AM
To: Linda J. Santos; ljsantos@webbcountytx.gov
Subject: BSE2019 Registration Confirmation



**Registration Confirmation
INVOICE/RECEIPT**

Date: 03-05-2019
Confirmation Number: 1830

BADGE INFORMATION

Badge First Name: Martin
Badge Last Name: Cuellar
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#).

CHANGES, click [here](#) to make a change to your registration or submit your change to
Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnldealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

Division: Sheriff	Date: 2/27/2019	Date of Training/Conference: 3/26/2019 to 3/28/2019						
Name of Training/Conference Course: Border Security Expo 2019		Location: San Antonio, Tx.						
Immediate Supervisor Approval:		Date approved:						
TCLOSE Mandated: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Training Hours per Officer (if applicable) _____								
Deputy Roberto M. Castillo or Mayra Balboa Training Officer approval: <i>R. M. Castillo</i>			Date approved:					
Name of Employee	Meals	Hotel	Fuel	Registration fees	Taxi fees	Airline Fees	Parking fees	Total Cost
Martin Cuellar ✓	\$136.00 <i>66.00</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Federico Garza Jr. ✓	\$136.00 <i>66.00</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Juan J. Rendon ✓	\$136.00 <i>66.00</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Julio Gonzalez ✓	\$136.00 <i>66.00</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Policarpio Medellin Jr. ✓	\$136.00 <i>66.00</i>			\$124.00				46.70 \$70.05 236.70 \$330.04
Noe Gonzalez	\$136.00 <i>66.00</i>	<i>558.11</i> <i>\$769.99</i>		\$124.00				46.70 \$70.05 191.11 \$1,100.04
					Total Estimated Cost:		\$5,550.04 4,024.03	
FINANCE USE ONLY								
Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other							
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No								
Account No: <i>1001-001-3010-458000</i>				Account Bal:	YTD % used			
Account No:				Account Bal:	YTD % used			
FINANCE DIRECTOR APPROVAL: <i>WB. C. Concha</i>	DATE: <i>3-5-19</i>							
FINAL DEPT APPROVAL								
Assistant Chief Juan J. Rendon	Date:			FINANCE USE ONLY - DATE / TIME STAMP SECTION				
<i>M. Cuellar Jr.</i> Sheriff Martin Cuellar, Jr.	Date:							

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	624.16

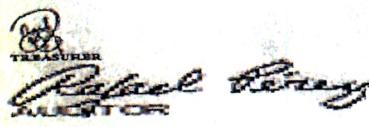


VENDOR NO: 18454

CHECK DATE: 03/13/2019

CHECK NO: 330416

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. Ⓢ

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERC BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
	03/13/2019		\$624.16	330416
PAY Six Hundred Twenty-Four and 16/100 Dollars				
TO THE ORDER OF MARTIN CUELLAR 902 VICTORIA STREET LAREDO, TX 78040				

LITHO BUSINESS FORMS, INC. (866) 727-7693 SO-8428674

VOID AFTER 90 DAYS

WCD-150848-111C-V3

330416 01149099031 0054404



HAMPTON INN DOWNTOWN
414 BOWIE STREET
SAN ANTONIO, TX 78205
United States of America
TELEPHONE 210-225-8500 • FAX 210-225-8526
Reservations
www.hamptoninn.com or 1 800 HAMPTON

CUELLAR, MARTIN
902 VICTORIA STREET
LAREDO TX 78041
UNITED STATES OF AMERICA

Room No: 502/SXPL
Arrival Date: 3/25/2019 2:43:00 PM
Departure Date: 3/27/2019 9:29:00 AM
Adult/Child: 1/0
Cashier ID: ERNESTO1109
Room Rate: 239.04
AL:
HH #
VAT #
Folio No/Che 628071 A

Confirmation Number: 83922081

HAMPTON INN DOWNTOWN 3/27/2019 9:29:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
3/25/2019	2189405	Advance Deposit CASH	(\$500.00)
3/25/2019	2189553	GUEST ROOM	\$239.04
3/25/2019	2189553	STATE TAX	\$14.52
3/25/2019	2189553	CITY TAX	\$26.02
3/25/2019	2189553	SATPID FEE	\$2.99
3/26/2019	2189842	GUEST ROOM	\$239.04
3/26/2019	2189842	STATE TAX	\$14.52
3/26/2019	2189842	CITY TAX	\$26.02
3/26/2019	2189842	SATPID FEE	\$2.99
3/27/2019	2189994	MC *8758	(\$65.14)
BALANCE			\$0.00

CREDIT CARD DETAIL

APPR CODE	604086	MERCHANT ID	50035-6170
CARD NUMBER	MC *8758	EXP DATE	06/23
TRANSACTION ID	2189994	TRANS TYPE	Sale

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

CUELLAR, MARTIN
902 VICTORIA STREET
LAREDO TX 78041
UNITED STATES OF AMERICA

502/SXPL
3/25/2019 2:43:00 PM
3/27/2019

1/0
239.04
R3X

Rate Plan:
HH #
AL:
Car:

Confirmation Number: 83922081

3/27/2019

3/25/2019	2189405	Advance Deposit CASH	(\$500.00)
3/25/2019	2189553	GUEST ROOM	\$239.04
3/25/2019	2189553	STATE TAX	\$14.52
3/25/2019	2189553	CITY TAX	\$26.02
3/25/2019	2189553	SATPID FEE	\$2.99
3/26/2019	2189842	GUEST ROOM	\$239.04
3/26/2019	2189842	STATE TAX	\$14.52
3/26/2019	2189842	CITY TAX	\$26.02
3/26/2019	2189842	SATPID FEE	\$2.99
3/27/2019	2189994	MC *8758	(\$65.14)
		BALANCE	\$0.00

MC *8758

3/27/2019

628071 A

CUELLAR, MARTIN

604086

-65.14



Webb County Sheriff's Office
Confirmation of Delivery

To: Angelica Morales

Date: 4/02/2019

Re: Travels to Closed

Urgent

For Review

To process

Please Reply

Note:

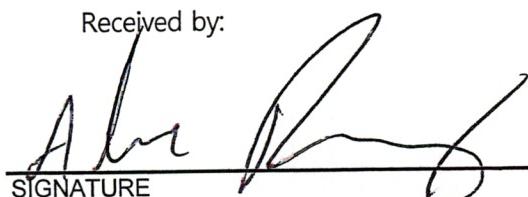
Martin Cuellar – RT#19-050– Travel Claim, and Hotel Receipt.

Federico Garza Jr. – RT#19-051–Travel Claim, and Hotel Receipt.

Juan J. Rendon – RT#19-052- Travel Claim, and Hotel Receipt.

Julio Gonzalez – RT#19-053 – Travel Claim, and Hotel Receipt.

Noe Gonzalez – RT#19-055 – Travel Claim, and Hotel Receipt.

Received by:


SIGNATURE

Alec Rodriguez

PRINTED NAME

4 : 15 pm
TIME

From: Linda J. Santos, Human Resource Clerk

Sheriff's Administration Building
www.webbcountytx.gov/sheriff.html
902 Victoria St. * Laredo Texas 78040
(956) 523-4504 * Fax (956) 523-5068

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 624.16
 Prepared By: Linda Jo Santos
 Request No.: RT19-050 051 OHM
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Federico Garza Jr.
 S.S. # Last 4 digits XXX-XX-5153
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo., 3/26/2019 to 3/27/2019
 San Antonio, Tx.

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of Department Head M. Cuellar Date 3/04/2019

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Federico Garza Jr. Garza

Date 3/04/2019

Printed Name & Signature of Claimant Federico Garza Jr. Date 3/04/2019

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

GENERAL QUESTIONS:

Date and time of departure 3/25/2019 2:30 p.m.
 Date and time of return 3/27/2019 10:00 a.m.
 Number of employees on trip 6
 Will airline flight be involved in this travel? No
 Will a County vehicle be used in the travel? Yes
 Will a rental vehicle be used in the travel? No
 (if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
 = _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2	Breakfasts @ \$10 each =	\$ 20.00
1	Lunches @ \$14 each =	\$ 14.00
2	Dinners @ \$16 each =	\$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

_____ \$ _____
 _____ \$ _____
TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED \$ 624.16

Employee owed 6.98 to be paid August
 19-071 + 6.98

RECEIVED
WEBB COUNTY BUSINESS OFFICE
2019-7 PM 301

<http://www.bordersecurityexpo.com/event-info/schedule-at-a-glance>

MSN | Outlook, Office, Skype ... Border Security Expo 2019 San ... HOME - Border Security Expo ... Schedule At-a-Glance - Box... OHC - Requisitions List

EVENT INFO ADVISORY BOARD CONFERENCE EXPO EXHIBIT NEWSROOM REGISTER

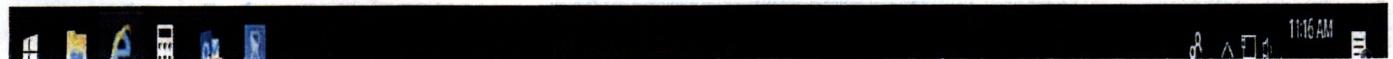
SCHEDULE AT-A-GLANCE

Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What is It? What Isn't It? And How Will It Change the Way We Protect the Homeland?
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11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
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3:00pm - 4:00pm	Plenary Panel: Border Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"



Linda J. Santos

From: Hampton Confirmed <noreply@h4.hilton.com>
Sent: Tuesday, March 5, 2019 2:12 PM
To: Linda J. Santos
Subject: Your Mar-25-2019 Confirmation #86019265



**FEDERICO GARZA, join
Hilton Honors**

sign up

**FEDERICO GARZA,
see you on Mar-25-2019**



Your Upcoming Stay

Hampton Inn San Antonio-Downtown (River Walk Area)
414 Bowie Street
San Antonio TX 78205, US
T: +1 2102258500

Confirmation #86019265

Mon

25

March

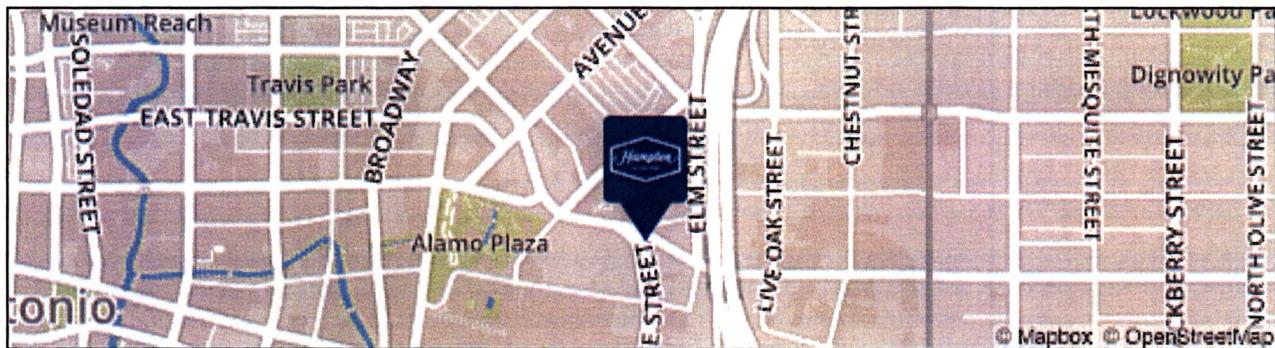
Check In: 4:00PM

Wed

27

March

Check Out: 11:00AM



Your Room Information

KING STUDY-NON SMOKING

Rooms: 1

Guests: 1 Adult

Plan ahead by making an Arrival Request.

Order Now

Your Rate Information

SEMI-FLEX

Rate Per Night:

Mar-25-2019 - Mar-27-2019

239.04 USD

Total for Stay per Room Rate:

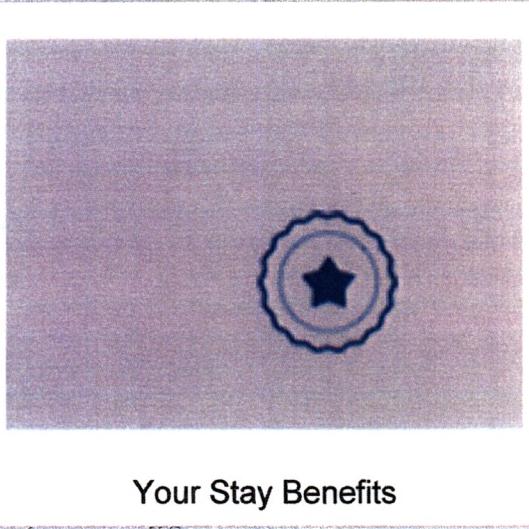
478.08 USD

Taxes

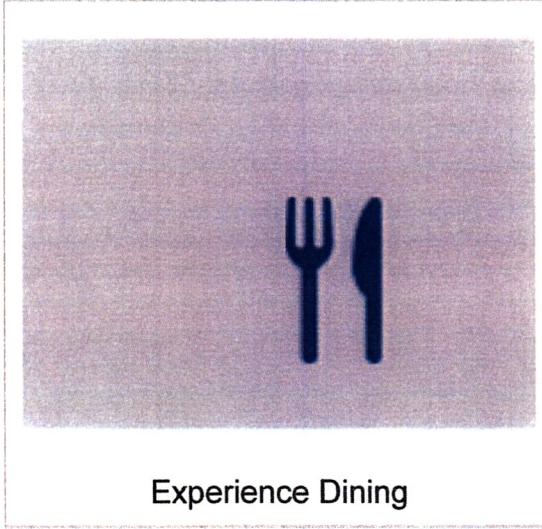
80.08 USD

Total for Stay

558.16 USD



Your Stay Benefits



Experience Dining



Your On Site Amenities



Explore Neighborhood

Alamo

enterprise

National.

fill up on points

for a limited time, earn up to
7,500 bonus points on car rentals

GET STARTED

FIND NEW EXPERIENCES
DURING YOUR UPCOMING STAY

EXPLORE NOW

travel
that delivers



2K Points per stay +
10K your way. Repeat.
now through May 5

Rate Rules and Cancellation Policy

- Your reservation is guaranteed for late arrival.
- If your plans change please let us know - it's free to cancel or update your reservation by 11:59pm local hotel time on Mar-21-2019

Comments & Requests | Additional Information

: See Group Notes CX House + 2 days:



We are a smoke-free hotel

Tax

16.75% Per Room Per Night

Self Parking: 20.00 USD



Please do not reply to this email, as mail sent to this address cannot be answered. If you have questions please visit our [Customer Support](#) page and select the applicable contact method.

Disclaimer: Room interior varies by hotel and the room booked may differ from room shown in this email.

[Click here](#) to see Hilton's policy regarding firearms on hotel premises.

*Standard Wi-Fi is free for Hilton Honors members. Premium, if available, has a fee (except for Diamond members). Wi-Fi access is not free in meeting spaces or at properties with a resort charge.

** Service of alcoholic beverages is subject to state and local laws. Must be of legal drinking age. Hilton Requests Upon Arrival(TM) items are subject to availability.

† Visit [Hilton.com/guarantee](#) to learn more about our Best Price Guarantee.

Using a debit/credit card to check in? A hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through date of check-out. Holds may not be released for 72 hours from date of check-out or longer at the discretion of your card issuer. [Click here](#) if you need to modify or cancel your reservation.

Any change to your arrival or departure date or room type is subject to hotel availability and may result in a possible rate change or additional fee. Changes also may not be possible at a later date. Please [click here](#) to see all rules and restrictions.

This message and any attachments may contain confidential information. If it has been sent to you in error or if you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-4HONORS (446-6677), or [click here](#).

Hilton Honors™ membership and redemption of Points are subject to [Hilton Honors Terms and Conditions](#).

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Hilton Reservations and Customer Care | 2050 Chenault Drive | Carrollton, Texas 75006, USA

2019_R03_B02_NMKT_0TR_V33_MULTIBR_H03_ML

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 11:39 AM
To: Linda J. Santos; ljsantos@webbcountyx.gov
Subject: BSE2019 Registration Confirmation



**Registration Confirmation
INVOICE/RECEIPT**

Date: 03-05-2019
Confirmation Number: 1831

BADGE INFORMATION

Badge First Name: Federico
Badge Last Name: Garza Jr.
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#).

CHANGES, click [here](#) to make a change to your registration or submit your change to Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnIdealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Account No: <i>1001-001-3010-458000</i>	Account Bal:	YTD % used	
Account No:	Account Bal:	YTD % used	
FINANCE DIRECTOR APPROVAL <i>WBarConga</i>	DATE: <i>35-19</i>		

FINAL DEPT APPROVAL

Assistant Chief Juan J. Rendon	Date:	FINANCE USE ONLY - DATE / TIME STAMP SECTION
		
Sheriff Martin Cuellar, Jr.	Date:	
		

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	624.16

VENDOR NO: 20592

CHECK DATE: 03/13/2019

CHECK NO: 330412

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. ®

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERCIAL BANK LAREDO, TEXAS 88-890-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
PAY Six Hundred Twenty-Four and 16/100 Dollars	03/13/2019	\$624.16	330412	
TO THE ORDER OF FEDERICO GARZA JR 902 VICTORIA STREET LAREDO, TX 78040				

SO-6426674

LIMHO BUSINESS FORMS, INC. (956) 727-7583

W-5180848-11C-V/C

Rafael Garza
AUDITOR

VOID AFTER 90 DAYS

#330412# : 114909903: 0054404#



**Sheriff Martin Cuellar
Webb County Sheriff's Office**

902 Victoria St.
Laredo, TX 78041
(956) 523-4500 Main Number
(956) 523-5059 Fax Number

To: Business Office Department
From: Linda Jo Santos, Human Resource Clerk for WCSO *ljs*
Date: April 2, 2019
Subject: Federico Garza Jr. RT #19-051 Reimbursement for Hotel difference

Federico Garza Jr. was given advance for hotel in the amount of \$558.16 but he was billed \$564.14, please reimburse him the amount of \$6.98. I have attached a copy of hotel receipt he paid.

If you have any questions, feel free to contact me at (956) 523-4504. I thank you in advance for your help on this matter.

Thanks

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

GARZA, FRED
8801 MCPHERSON RD 3D
LAREDO TX 78045
UNITED STATES OF AMERICA

333/SXPL
3/25/2019 2:37:00 PM
3/27/2019

1/0
239.04
Rate Plan:
HH #
AL:
Car:
R3X
922108861 SILVER

Confirmation Number: 86019265

3/27/2019

3/25/2019	2189504	GUEST ROOM	\$239.04
3/25/2019	2189504	STATE TAX	\$14.52
3/25/2019	2189504	CITY TAX	\$26.02
3/25/2019	2189504	SATPID FEE	\$2.99
3/26/2019	2189789	GUEST ROOM	\$239.04
3/26/2019	2189789	STATE TAX	\$14.52
3/26/2019	2189789	CITY TAX	\$26.02
3/26/2019	2189789	SATPID FEE	\$2.99
3/27/2019	2189951	MC *4366	(\$565.14)
		BALANCE	\$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit [Honors.com](#)

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

MC *4366

3/27/2019 628072 A

GARZA, FRED

02534B

-565.14



Webb County Sheriff's Office
Confirmation of Delivery

To: Angelica Morales

Date: 4/02/2019

Re: Travels to Closed

Urgent For Review To process Please Reply

Note:

Martin Cuellar – RT#19-050– Travel Claim, and Hotel Receipt.

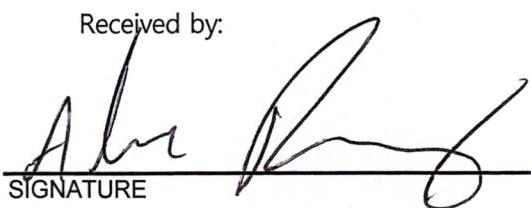
Federico Garza Jr. – RT#19-051–Travel Claim, and Hotel Receipt.

Juan J. Rendon – RT#19-052- Travel Claim, and Hotel Receipt.

Julio Gonzalez – RT#19-053 – Travel Claim, and Hotel Receipt.

Noe Gonzalez – RT#19-055 – Travel Claim, and Hotel Receipt.

Received by:


SIGNATURE

Alec Rodriguez
PRINTED NAME

4 , 2 , 19
DATE

4 : 15 pm
TIME

From: Linda J. Santos, Human Resource Clerk

Sheriff's Administration Building
www.webbcountytx.gov/sheriff.html
902 Victoria St. * Laredo Texas 78040
(956) 523-4504 * Fax (956) 523-5068



Request Total \$ 624.16
 Prepared By: Linda Jo Santos
 Request No.: RT19-052
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Juan J. Rendon
 S.S. # Last 4 digits XXX-XX-5038
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 to 3/28/2019
 San Antonio, Tx

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of
 Department Head M. Cuellar

Date 3/6/19

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Juan J. Rendon

3/7/2019

Printed Name & Signature of
 Claimant Juan J. Rendon

Date

GENERAL QUESTIONS:

Date and time of departure 3/25 2019 2:30 p.m.
 Date and time of return 3/28/2019 10:00 am. 3/26/2019
 Number of employees on trip 6
 Will airline flight be involved in this travel? No
 Will a County vehicle be used in the travel? Yes
 Will a rental vehicle be used in the travel? No
 (if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
 = _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2 Breakfasts @ \$10 each = \$ 20.00
 1 Lunches @ \$14 each = \$ 14.00
 2 Dinners @ \$16 each = \$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

_____ \$ _____
 _____ \$ _____
TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED \$ 624.16

*Employer owed \$36.16 parking fee + hotel
 difference submitted as request for payment
 # RT19-052*

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

Form AP02 Revised 01/15

2019 APR - 7 PM 3:00
 BUSINESS OFFICE
 APPROVED
 3/26/2019

http://www.bordersecurityexpo.com/event-info/schedule-at-a-glance

MSN | Outlook, Office, Skype... Border Security Expo 2019 San... HOME - Border Security Expo... Schedule At-a-Glance - Bo... OHC - Requisitions List

EVENT INFO ADVISORY BOARD CONFERENCE EXPO EXHIBIT NEWSROOM REGISTER

SCHEDULE AT-A-GLANCE

Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What is It? What isn't It? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
2:30pm - 3:00pm	Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection
3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"

Linda J. Santos

From: Hampton Confirmed <noreply@h4.hilton.com>
Sent: Tuesday, March 5, 2019 2:12 PM
To: Linda J. Santos
Subject: Your Mar-25-2019 Confirmation #82349281



JUAN RENDON, Join Hilton Honors

sign up

**JUAN RENDON,
see you on Mar-25-2019**



Your Upcoming Stay

Hampton Inn San Antonio-Downtown (River Walk Area)
414 Bowie Street
San Antonio TX 78205, US
T: +1 2102258500

Confirmation #82349281

Mon

25

March

Check In: 4:00PM

Wed

27

March

Check Out: 11:00AM



Your Room Information

KING STUDY-NON SMOKING

Rooms: 1

Guests: 1 Adult

Plan ahead by making an Arrival Request.

Order Now

Your Rate Information

SEMI-FLEX

Rate Per Night:

Mar-25-2019 - Mar-27-2019

239.04 USD

Total for Stay per Room Rate:

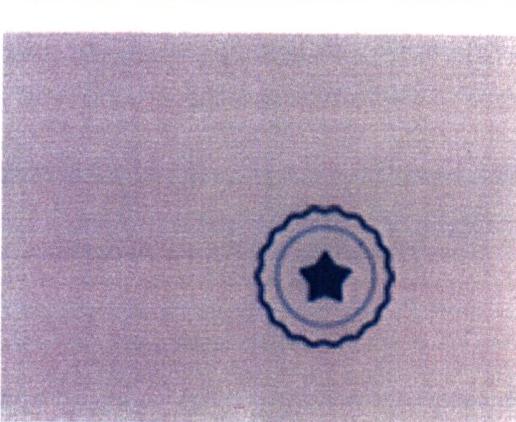
478.08 USD

Taxes

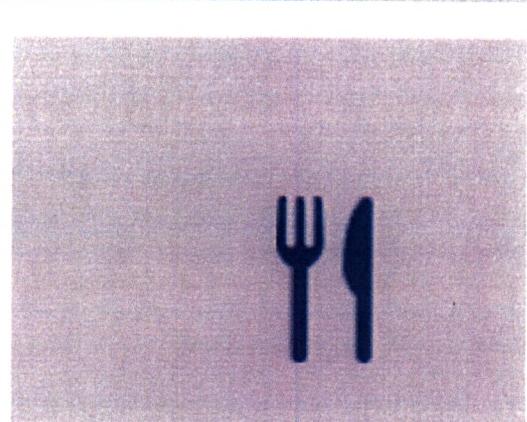
80.08 USD

Total for Stay

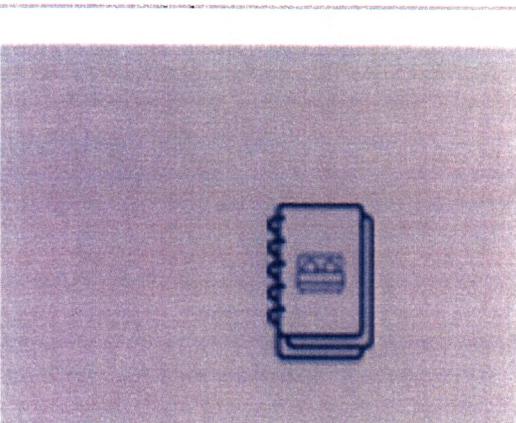
558.16 USD



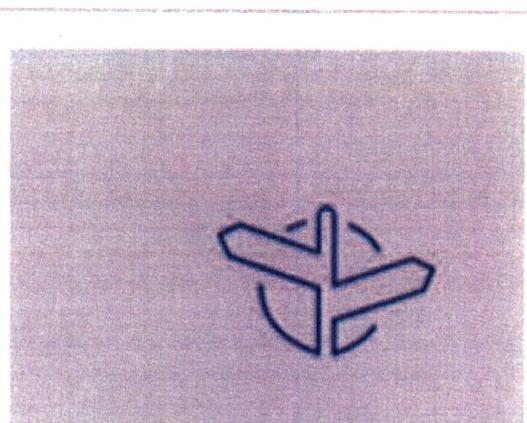
Your Stay Benefits



Experience Dining



Your On Site Amenities



Explore Neighborhood

Alamo

enterprise

National.

fill up on points

for a limited time, earn up to
7,500 bonus points on car rentals

GET STARTED

FIND NEW EXPERIENCES
DURING YOUR UPCOMING STAY

EXPLORE NOW

travel
that delivers

2K Points per stay +
10K your way. Repeat.
now through May 5

Rate Rules and Cancellation Policy

- Your reservation is guaranteed for late arrival.
- If your plans change please let us know - it's free to cancel or update your reservation by 11:59pm local hotel time on Mar-21-2019

Comments & Requests | Additional Information

: See Group Notes CX House + 2 days:



We are a smoke-free hotel

Tax

16.75% Per Room Per Night

Self Parking: 20.00 USD

Hilton



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*Standard Wi-Fi is free for Hilton Honors members. Premium, if available, has a fee (except for Diamond members). Wi-Fi access is not free in meeting spaces or at properties with a resort charge.

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† Visit [Hilton.com/guarantee](#) to learn more about our Best Price Guarantee.

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Hilton Honors™ membership and redemption of Points are subject to [Hilton Honors Terms and Conditions](#)

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Hilton Reservations and Customer Care | 2050 Chenault Drive | Carrollton, Texas 75006, USA

2019_R03_B02_NMKTG_03_V33_MULTIBR_H03_ML

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 11:42 AM
To: Linda J. Santos; ljsantos@webbcountyx.gov
Subject: BSE2019 Registration Confirmation



Registration Confirmation INVOICE/RECEIPT

Date: 03-05-2019
Confirmation Number: 1832

BADGE INFORMATION

Badge First Name: Juan
Badge Last Name: Rendon
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#).

CHANGES, click [here](#) to make a change to your registration or submit your change to Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnIdealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

Division: Sheriff	Date: 2/27/2019	Date of Training/Conference: 3/26/2019 to 3/28/2019							
Name of Training/Conference Course: Border Security Expo 2019		Location: San Antonio, Tx.							
Immediate Supervisor Approval:		Date approved:							
TCLEOSE Mandated: Yes <u> </u> No Total Training Hours per Officer (if applicable) _____									
Deputy Roberto M. Castillo or Mayra Balboa Training Officer approval: <i>R. M. Castillo</i>				Date approved:					
Name of Employee	Meals	Hotel	Fuel	Registration fees	Taxi fees	Airline Fees	Parking fees	Total Cost	
Martin Cuellar ✓	\$136.00 <i>66.11</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99	
Federico Garza Jr. ✓	\$136.00 <i>66.11</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99	
Juan J. Rendon ✓	\$136.00 <i>66.11</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99	
Julio Gonzalez ✓	\$136.00 <i>66.11</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99	
Policarpio Medellin Jr. ✓	\$136.00 <i>66.11</i>			\$124.00				46.70 \$70.05 236.70 \$330.04	
Noe Gonzalez	\$136.00 <i>66.11</i>	\$769.99 <i>58.11</i>		\$124.00				46.70 \$70.05 191.11 \$1,100.04	
					Total Estimated Cost:			\$5,550.04 <i>4,024.05</i>	
FINANCE USE ONLY									
Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other								
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No									
Account No: <i>1001-001-3010-458000</i>	Account Bal:			YTD % used					
Account No:	Account Bal:			YTD % used					
FINANCE DIRECTOR APPROVAL <i>W. Balcony</i>	DATE: <i>35-19</i>								
FINAL DEPT APPROVAL									
Assistant Chief Juan J. Rendon		Date:			FINANCE USE ONLY - DATE / TIME STAMP SECTION				
<i>M. Cuellar</i>									
Sheriff Martin Cuellar, Jr.		Date:							

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

RENDON, JUAN JOSE
4402 MARCELLA
LAREDO TX TX 78041
UNITED STATES OF AMERICA

417/KXTY
3/25/2019 4:02:00 PM
3/27/2019

1/0
239.04
R3X
912103504 BLUE
Rate Plan:
HH #
AL:
Car:

Confirmation Number: 82349281

3/27/2019

3/25/2019	2189406	Advance Deposit CASH	(\$564.14)
3/25/2019	2189530	GUEST ROOM	\$239.04
3/25/2019	2189530	STATE TAX	\$14.52
3/25/2019	2189530	CITY TAX	\$26.02
3/25/2019	2189530	SATPID FEE	\$2.99
3/26/2019	2189817	GUEST ROOM	\$239.04
3/26/2019	2189817	STATE TAX	\$14.52
3/26/2019	2189817	CITY TAX	\$26.02
3/26/2019	2189817	SATPID FEE	\$2.99
3/27/2019	2189990	GUEST ROOM	\$1.00
3/27/2019	2189990	STATE TAX	\$0.06
3/27/2019	2189990	CITY TAX	\$0.11
3/27/2019	2189990	SATPID FEE	\$0.01
3/27/2019	2189991	ROOM ALLOWANCE	(\$1.12)
3/27/2019	2189992	ROOM ALLOWANCE	(\$1.06)
		BALANCE	\$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit [Honors.com](#)

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

628073 A



**Sheriff Martin Cuellar
Webb County Sheriff's Office**

902 Victoria St.
Laredo, TX 78041
(956) 523-4500 Main Number
(956) 523-5059 Fax Number

To: Business Office Department

From: Linda Jo Santos, Human Resource Clerk for WCSO *WV*

Date: April 2, 2019

Subject: Juan J. Rendon RT#19-052 Reimbursement for Hotel difference and Parking Fee

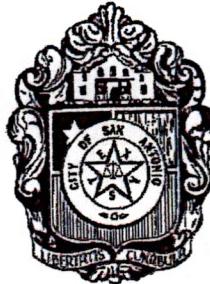
Juan J. Rendon was given advance for hotel in the amount of \$558.16 but he was bill \$566.32 needs difference paid to him In the \$8.16 and two parking fee in the amount of \$28.00. Total to reimburse employee is \$36.16

If you have any questions, feel free to contact me at (956) 523-4504. I thank you in advance for your help on this matter.

Thanks

Expires **03/25
08:59 PM**

Payment Details
Machine #121266 CASH
03/25/19 04:59 PM \$ 10.00



TICKET MUST BE DISPLAYED IN VEHICLE

PARKING RECEIPT

RECEIPT

License Plate Number

HJN5388

Expiration Date/Time

11:16 PM

MAR 26, 2019

Purchase Date/Time: 06:16pm Mar 26, 2019
Total Due: \$18.00 Rate: Up to 5hrs \$18
Total Paid: \$18.00 Pmt Type: CC (Swipe)
Ticket #: 06058041
Inv #: 520119020047
Parking: 3rd St Lot
Machine Name: 3rd St Lot New

10.00
18.00
28.00

RECEIPT

****-6306, Visa

Auth #: 181073

414 BOWIE STREET
 SAN ANTONIO, TX 78205
 TELEPHONE 210-225-8500 • FAX 210-225-8526

RENDON, JUAN JOSE
 4402 MARCELLA
 LAREDO TX TX 78041
 UNITED STATES OF AMERICA

417/KXTY
 3/25/2019 4:02:00 PM
 3/27/2019

1/0
 239.04
 Rate Plan:
 HH #
 AL:
 Car:

Confirmation Number: 82349281

3/27/2019

3/26/2019	2189406	Advance Deposit CASH	(\$564.14)
3/25/2019	2189530	GUEST ROOM	\$239.04
3/25/2019	2189530	STATE TAX	\$14.52
3/25/2019	2189530	CITY TAX	\$26.02
3/25/2019	2189530	SATPID FEE	\$2.99
3/26/2019	2189817	GUEST ROOM	\$239.04
3/26/2019	2189817	STATE TAX	\$14.52
3/26/2019	2189817	CITY TAX	\$26.02
3/26/2019	2189817	SATPID FEE	\$2.99
3/27/2019	2189990	GUEST ROOM	\$1.00
3/27/2019	2189990	STATE TAX	\$0.06
3/27/2019	2189990	CITY TAX	\$0.11
3/27/2019	2189990	SATPID FEE	\$0.01
3/27/2019	2189991	ROOM ALLOWANCE	(\$1.12)
3/27/2019	2189992	ROOM ALLOWANCE	(\$1.06)
		BALANCE	\$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit [Honors.com](#)

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

628073 A



**Sheriff Martin Cuellar
Webb County Sheriff's Office**

902 Victoria St.
Laredo, TX 78041
(956) 523-4500 Main Number
(956) 523-5059 Fax Number

To: Business Office Department

From: Linda Jo Santos, Human Resource Clerk for WCSO

Date: April 2, 2019

Subject: Juan J. Rendon RT#19-052 Reimbursement for Hotel difference and Parking Fee

LJ

Juan J. Rendon was given advance for hotel in the amount of \$558.16 but he was bill \$566.32 needs difference paid to him In the \$8.16 and two parking fee in the amount of \$28.00. Total to reimburse employee is \$36.16

If you have any questions, feel free to contact me at (956) 523-4504. I thank you in advance for your help on this matter.

Thanks

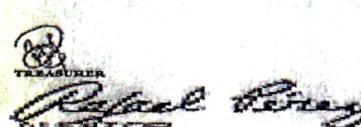
DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	624.16

VENDOR NO: 3392

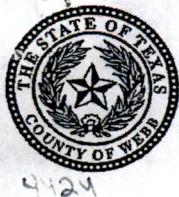
CHECK DATE: 03/13/2019

CHECK NO: 330415

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. (®)

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERC BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
PAY Six Hundred Twenty-Four and 16/100 Dollars	03/13/2019		\$624.16	330415
TO THE ORDER OF JUAN JOSE RENDON 902 VICTORIA ST. LAREDO, TX 78040				

VOID AFTER 90 DAYS



Request Total \$ 624.16
 Prepared By: Linda Jo Santos
 Request No.: RT19-053
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Julio Gonzalez
 S.S. # Last 4 digits XXX-XX-2600
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 to 3/28/2019
 San Antonio, Tx

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of Department Head M. Cuellar 3/07/19

Date

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Julio Gonzalez 83/07/19

Printed Name & Signature of Claimant

Date

GENERAL QUESTIONS:

Date and time of departure 3/25 2019 2:30 p.m.
 Date and time of return 3/27/2019 10:00 a.m.
 Number of employees on trip 6
 Will airline flight be involved in this travel? No
 Will a County vehicle be used in the travel? Yes
 Will a rental vehicle be used in the travel? No
 (if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
 = _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2	Breakfasts @ \$10 each =	\$ 20.00
1	Lunches @ \$14 each =	\$ 14.00
2	Dinners @ \$16 each =	\$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

_____	\$ _____
_____	\$ _____

TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED \$ 624.16

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____ Form AP02 Revised 01/15

RECEIVED
WEBB COUNTY BUSINESS OFFICE
MAR - 7 PM 2019
Form AP02 Revised 01/15

Linda J. Santos

From: Hampton Confirmed <noreply@h4.hilton.com>
Sent: Tuesday, March 5, 2019 2:13 PM
To: Linda J. Santos
Subject: Your Mar-25-2019 Confirmation #85757153



**JULIO GONZALES, Join
Hilton Honors**

sign up

**JULIO GONZALES,
see you on Mar-25-2019**



Your Upcoming Stay

Hampton Inn San Antonio-Downtown (River Walk Area)
414 Bowie Street
San Antonio TX 78205, US
T: +1 2102258500

Confirmation #85757153

Total for Stay per Room Rate:

478.08 USD

Taxes

80.08 USD

Total for Stay

558.16 USD



Your Stay Benefits



Experience Dining



Your On Site Amenities



Explore Neighborhood

http://www.bordersecurityexpo.com/event-info/schedule-at-a-glance

MSN | Outlook, Office, Skype, ... Border Security Expo 2019 San... HOME - Border Security Expo... Schedule At-a-Glance - Bor... OHC - Requisitions List

EVENT INFO ADVISORY BOARD CONFERENCE EXPO EXHIBIT NEWSROOM REGISTER

SCHEDULE AT-A-GLANCE

Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What is It? What isn't It? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
2:30pm - 3:00pm	Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection
3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"





Southwest Texas Fusion Center

San Antonio Police Department

2019 SWTFC Annual Conference

Henry B. Gonzalez Convention Center – April 2, 3 & 4, 2019

900 E Market St., San Antonio, TX 78205 – Meeting Room 214



Agenda

Tuesday, April 2, 2019

1300 – 1700 **Conference Registration.** Hotel Marriott River Walk, lobby area. Attendees required showing LE ID.

Wednesday, April 3, 2019

- 0700 – 0745 Coffee
- 0745 – 0800 **Opening Remarks, by SWTFC and SAPD Command**
- 0800 – 0920 **Organized Crime Trends, by USBP: DRT SIU, DPAIC John Perry & Laredo SIU, DPAIC Rene A. Valenzuela II.**
- 0920 – 0930 Break
- 0930 – 1015 **Gangs and OMGs, by SAPD-TAG San Antonio, Det. John Schiller**
- 1015 – 1145 **Operation Texas Rocker: Taking Down the National Leadership of the Bandidos Outlaw Motorcycle Organization by AUSA Eric J. Fuchs, DEA SA Chad Lloyd and DEA-SADO GS Henry Gonzalez**
- 1145 – 1300 *Lunch (on your own)*
- 1300 – 1400 **Vehicle Theft Links with US Border by Laredo Police Department, VTTFSgt. Armando Elizondo, Jr.**
- 1400 – 1420 Break
- 1420 – 1520 **Border Security and Weapons Acquisitions by ATF Special Agent Christopher O Benavides**
- 1530 – 1700 **Money Laundering Investigations by William Mitchell, Commander Financial Inv. Team, DEA/HIDTA**

Thursday, April 4, 2019

- 0730 – 0800 Coffee
- 0800 – 0945 **Virtual Currency Investigations by FinCEN, Compliance & Enforcement Officer Kevin O'Connor**
- 0945 – 0950 Break
- 0950 – 1040 **Extremist Digital Fundraising & Mitigation Methods by SWTFC Analysts Daniel McKee and Aric Jimenez.**
- 1100 – 1145 **Counter Intelligence Briefing by DPS ICTD, Analyst Caroline Bruff**
- 1145 – 1300 *Lunch (on your own)*
- 1300 – 1630 **Pablo Escobar, Dismantling the Medellin Cartel by Steve Murphy & Javier Peña, DEA Special Agents (Retired)**
- 1645 – 1700 **Closing Remarks. Note: Attendance Certificates will be emailed.**



Rate Rules and Cancellation Policy

- Your reservation is guaranteed for late arrival.
 - If your plans change please let us know - it's free to cancel or update your reservation by 11:59pm local hotel time on Mar-21-2019

Comments & Requests | Additional Information

: See Group Notes CX House + 2 days:



We are a smoke-free hotel

Tax

16.75% Per Room Per Night

Self Parking: 20.00 USD

Hilton

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Disclaimer: Room interior varies by hotel and the room booked may differ.

[Click here to see all available rooms](#)

[Click here](#) to see Hilton's policy regarding firearms on hotel premises

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** Service of alcoholic beverages is prohibited.

^{**} Service of alcoholic beverages is subject to state and local laws. Must be of legal drinking age. Hilton Requests Upon Arrival™ items are subject to availability.
[†] Visit Hilton.com/guarantees to learn more about our guarantees.

† Visit Hilton.com/guarantee to learn more about our Best Price Guarantee

Using a debit/credit card to check in? A hold may be placed on your card account for the full anticipated amount to be owed to the hotel, including estimated incidentals, through date of check-out. Holds may not be released for 72 hours from date of check-out or longer at the discretion of your card issuer. [Click here](#) if you need to modify or cancel your reservation.

Any change to your arrival or departure date or room type is subject to hotel availability and may result in a possible rate change or additional fee. Changes also may not be possible at a later date. Please click here to see all rules and restrictions.

This message and any attachments may contain confidential information. If it has been sent to you in error or if you have questions regarding your reservation, please contact Hilton Reservations and Customer Care at 1-800-4HILTON (1-800-444-5866).

Hilton Honors™ membership and redemption of Points are at 1-800-4HONHRS (446-8877), or www.hiltonhonors.com.

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Reservations and Customer Care | 2050 Chena

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 11:45 AM
To: Linda J. Santos; ljsantos@webbcountyx.gov
Subject: BSE2019 Registration Confirmation



Registration Confirmation INVOICE/RECEIPT

Date: 03-05-2019
Confirmation Number: 1833

BADGE INFORMATION

Badge First Name: Julio
Badge Last Name: Gonzalez
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#).

CHANGES, click [here](#) to make a change to your registration or submit your change to Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnIdealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

Division: Sheriff	Date: 2/27/2019	Date of Training/Conference: 3/26/2019 to 3/28/2019						
Name of Training/Conference Course: Border Security Expo 2019			Location: San Antonio, Tx.					
Immediate Supervisor Approval:				Date approved:				
TCLEOSE Mandated: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Total Training Hours per Officer (if applicable) _____								
Deputy Roberto M. Castillo or Mayra Balboa Training Officer approval: <i>R.M.C.</i>					Date approved:			
Name of Employee	Meals	Hotel	Fuel	Registration fees	Taxi fees	Airline Fees	Parking fees	Total Cost
Martin Cuellar ✓	\$136.00 <i>66</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Federico Garza Jr. ✓	\$136.00 <i>66</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Juan J. Rendon ✓	\$136.00 <i>66</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Julio Gonzalez ✓	\$136.00 <i>66</i>	\$769.99 <i>558.11</i>		\$124.00				748.11 \$1,029.99
Policarpio Medellin Jr. ✓	\$136.00 <i>66</i>			\$124.00				46.70 \$70.05 236.70 \$330.04
Noe Gonzalez	\$136.00 <i>66</i>	\$769.99 <i>558.11</i>		\$124.00				46.70 \$70.05 194.70 \$1,100.04
					Total Estimated Cost: \$3,550.04 <i>4,024.05</i>			

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Account No: <i>1001-001-3010-458000</i>	Account Bal:	YTD % used	
Account No:	Account Bal:	YTD % used	
FINANCE DIRECTOR APPROVAL: <i>MTBaconga</i>	DATE: <i>3-5-19</i>		

FINAL DEPT APPROVAL

Assistant Chief Juan J. Rendon	Date:	FINANCE USE ONLY - DATE / TIME STAMP SECTION	
Sheriff Martin Cuellar, Jr. <i>M. Cuellar Jr.</i>	Date:		

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	624.16

VENDOR NO: 4242

CHECK DATE: 03/14/2019

CHECK NO: 330467

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. (A)

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERCIAL BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
PAY	03/14/2019		\$624.16	330467
Six Hundred Twenty-Four and 16/100 Dollars				
TO THE ORDER OF	GONZALEZ, JULIO C. 902 VICTORIA ST. LAREDO, TX 78040			
 				
VOID AFTER 90 DAYS				

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

GONZALES, JULIO
902 VICTORIA STREET
LAREDO TX 78041
UNITED STATES OF AMERICA

409/SXPL
3/25/2019 2:41:00 PM
3/27/2019

1/0
239.04

Rate Plan:
HH #
AL:
Car:

R3X

Confirmation Number: 85757153

3/27/2019

3/25/2019	2189404	Advance Deposit CASH	(\$565.14)
3/25/2019	2189522	GUEST ROOM	\$239.04
3/25/2019	2189522	STATE TAX	\$14.52
3/25/2019	2189522	CITY TAX	\$26.02
3/25/2019	2189522	SATPID FEE	\$2.99
3/26/2019	2189810	GUEST ROOM	\$239.04
3/26/2019	2189810	STATE TAX	\$14.52
3/26/2019	2189810	CITY TAX	\$26.02
3/26/2019	2189810	SATPID FEE	\$2.99
		BALANCE	\$0.00

628074 A



GONZALES, JULIO

902 VICTORIA STREET

LAREDO TX 78041
UNITED STATES OF AMERICA

Room No: 409/SXPL
Arrival Date: 3/25/2019 2:41:00 PM
Departure Date: 3/27/2019 9:33:00 AM
Adult/Child: 1/0
Cashier ID: ERNESTO1109
Room Rate: 239.04
AL:
HH #
VAT #
Folio No/Che 628074 A

Confirmation Number: 85757153

HAMPTON INN DOWNTOWN 3/27/2019 9:33:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
3/25/2019	2189404	Advance Deposit CASH	(\$565.14)
3/25/2019	2189522	GUEST ROOM	\$239.04
3/25/2019	2189522	STATE TAX	\$14.52
3/25/2019	2189522	CITY TAX	\$26.02
3/25/2019	2189522	SATPID FEE	\$2.99
3/26/2019	2189810	GUEST ROOM	\$239.04
3/26/2019	2189810	STATE TAX	\$14.52
3/26/2019	2189810	CITY TAX	\$26.02
3/26/2019	2189810	SATPID FEE	\$2.99
BALANCE			\$0.00



Webb County Sheriff's Office
Confirmation of Delivery

To: Angelica Morales

Date: 4/02/2019

Re: Travels to Closed

Urgent For Review To process Please Reply

Note:

Martin Cuellar – RT#19-050 – Travel Claim, and Hotel Receipt.

Federico Garza Jr. – RT#19-051 – Travel Claim, and Hotel Receipt.

Juan J. Rendon – RT#19-052 – Travel Claim, and Hotel Receipt.

Julio Gonzalez – RT#19-053 – Travel Claim, and Hotel Receipt.

Noe Gonzalez – RT#19-055 – Travel Claim, and Hotel Receipt.

Received by:

A handwritten signature consisting of stylized initials and a surname.

SIGNATURE

Alec Rodriguez

PRINTED NAME

4/2/19

DATE

4:15 pm

TIME

From: Linda J. Santos, Human Resource Clerk

Sheriff's Administration Building
www.webbcountytx.gov/sheriff.html
902 Victoria St. * Laredo Texas 78040
(956) 523-4504 * Fax (956) 523-5068

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 112.70
 Prepared By: Linda Jo Santos
 Request No.: RT19-054
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name	<u>Policarpio Medellin IV</u>
S.S. # Last 4 digits	<u>XXX-XX-4791</u>
Address	<u>902 Victoria Street, Laredo Tx</u>
Invoice# (Auditor)	<u>78041</u>

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo. 3/26/2019 to 3/28/2019
San Antonio, Tx.

Note: Proof of Completed course must be remitted.
 Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of
Department Head

M. Cuellar Date 3/26/19

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Policarpio Medellin IV

Printed Name & Signature of
Claimant

Date

3/26/19

GENERAL QUESTIONS:

Date and time of departure 3/25/2019 2:30 p.m.
 Date and time of return 3/27/2019 10:00 a.m.
 Number of employees on trip 6
 Will airline flight be involved in this travel? No
 Will a County vehicle be used in the travel? Yes
 Will a rental vehicle be used in the travel? No
 (if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
 = _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2	Breakfasts @ \$10 each =	\$ <u>20.00</u>
1	Lunches @ \$14 each =	\$ <u>14.00</u>
2	Dinners @ \$16 each =	\$ <u>32.00</u>
		TOTAL \$ <u>66.00</u>

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

_____ night(s) on trip @ _____ per night =

TOTAL \$ 0.00

OTHER EXPENSES (receipts required):

Parking Fee \$ 46.70

\$ _____

TOTAL \$ 46.70

TOTAL TRAVEL EXPENSES ADVANCED

330417 313

RECEIVED
WEBB COUNTY BUSINESS OFFICE
\$ 112.70
2019 MAR - 7 PM 3:01

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____ Form AP02 Revised 01/15



Sheriff Martin Cuellar
Webb County Sheriff's Office

902 Victoria St.
Laredo, TX 78041

(956) 523-4500 Main Number
(956) 523-5068 Fax Number

MEMO

To: Angelica Morales, Staff Auditor

From: Linda J. Santos, Human Resource Sheriff's Office

Date: 4/05/2019

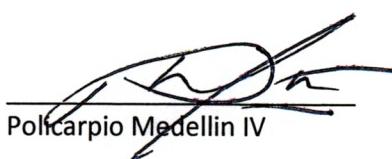
Reference: RT19-054 Policarpio Medellin IV Border Security Expo 3/26/2019 to 3/28/2019

We had advance Mr. Medellin IV the following:

Advance Parking Fee	\$46.70
Receipts Given	0.00
Parking Fee Owed	\$46.70

Please charge back Mr. Medellin IV via payroll the amount of \$46.70.

I Mr. Policarpio Medellin IV authorized the deduction of \$46.70 thru payroll.



Policarpio Medellin IV

4/05/2019

http://www.bordersecurityexpo.com/event-info/schedule-at-a-glance

MSN | Outlook | Office | Skype... Border Security Expo 2019 San... HOME - Border Security Expo... Schedule At-a-Glance - Bor... OHC - Requisitions List

EVENT INFO ADVISORY BOARD CONFERENCE EXPO EXHIBIT NEWSROOM REGISTER

SCHEDULE AT-A-GLANCE

Monday, March 25

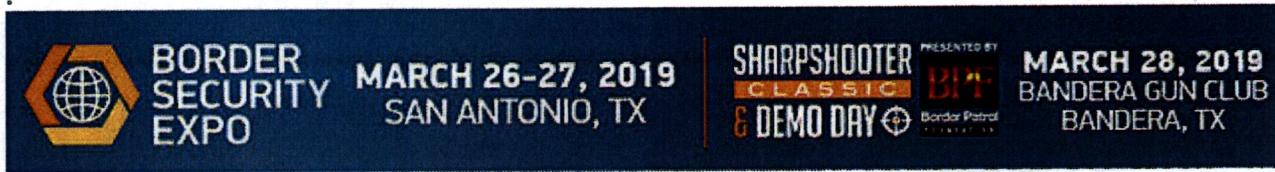
10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What is It? What isn't It? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
2:30pm - 3:00pm	Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection
3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 11:50 AM
To: Linda J. Santos; ljsantos@webbcountyx.gov
Subject: BSE2019 Registration Confirmation



Registration Confirmation **INVOICE/RECEIPT**

Date: 03-05-2019
Confirmation Number: 1834

BADGE INFORMATION

Badge First Name: Policarpio
Badge Last Name: Medellin IV
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#). *join*

CHANGES, click [here](#) to make a change to your registration or submit your change to Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnIdealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	112.70

VENDOR NO: 17247

CHECK DATE: 03/13/2019

CHECK NO: 330417

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. ☐

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERC BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
PAY One Hundred Twelve and 70/100 Dollars	03/13/2019		\$112.70	330417
TO THE ORDER OF POLICARPIO MEDELLIN-IV 902 VICTORIA STREET LAREDO, TX 78040				

VOID AFTER 90 DAYS

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Account No: <i>1001-001-3010-458000</i>	Account Bal:	YTD % used	
Account No:	Account Bal:	YTD % used	
<i>FINANCE DIRECTOR APPROVAL: MBarConca</i>	DATE: <i>3.5.19</i>		

FINAL DEPT APPROVAL

Assistant Chief Juan J. Rendon	Date:	FINANCE USE ONLY - DATE / TIME STAMP SECTION
		
Sheriff Martin Cuellar, Jr.	Date:	

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

<i>Division:</i> Sheriff	<i>Date:</i> 2/27/2019	<i>Date of Training/Conference:</i> 3/26/2019 to 3/28/2019
<i>Name of Training/Conference Course:</i> Border Security Expo 2019	<i>Location:</i> San Antonio, Tx.	

Immediate Supervisor Approval: _____ **Date approved:** _____

TITLE **CLOSED** Mandated: Yes _____ No _____
Total Training Hours per Officer (if applicable) _____

Deputy Roberto M. Castillo or Mayra Balboa
Training Officer approval:  Date approved:

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Account No: 1001-001-3010-458000 L ↗	Account Bal:	YTD % used	
Account No:	Account Bal:	YTD % used	
FINANCE DIRECTOR APPROVAL	DATE: 35-19		

FINAL DEPT APPROVAL

		FINANCE USE ONLY - DATE / TIME STAMP SECTION
Assistant Chief Juan J. Rendon	Date:	
M. Cuellar Jr.	Date:	

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.



Webb County Sheriff's Office
Confirmation of Delivery

To: Angelica Morales

Date: 4/11/2019

Re: Travels to Closed

Urgent For Review To process Please Reply

Note:

Policarpio Medellin IV – Travel Claim and Charge Back.

Received by:

Linda Santos

SIGNATURE

Lorette

PRINTED NAME

4/16/19

DATE

:

TIME

From: Linda J. Santos, Human Resource Clerk

Sheriff's Administration Building
www.webbcountytx.gov/sheriff.html
902 Victoria St. * Laredo Texas 78040
(956) 523-4504 * Fax (956) 523-5068

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 670.86
 Prepared By: Linda Jo Santos
 Request No.: RT19-055
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Noe Gonzalez
 S.S. # Last 4 digits XXX-XX-7527
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo. 3/26/2019 to 3/28/2019
San Antonio, Tx.

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar _____

Printed Name & Signature of Department Head M. Cuellar Date 3/4/19

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Noe Gonzalez 03/07/19

Printed Name & Signature of Claimant Noe Date 3/3/19

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

GENERAL QUESTIONS:

Date and time of departure 3/25/2019 2:30 p.m.

Date and time of return 3/27/2019 10:00 a.m.

Number of employees on trip _____

Will airline flight be involved in this travel? No

Will a County vehicle be used in the travel? Yes

Will a rental vehicle be used in the travel? No

(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____

= _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2 Breakfasts @ \$10 each = \$ 20.00

1 Lunches @ \$14 each = \$ 14.00

2 Dinners @ \$16 each = \$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

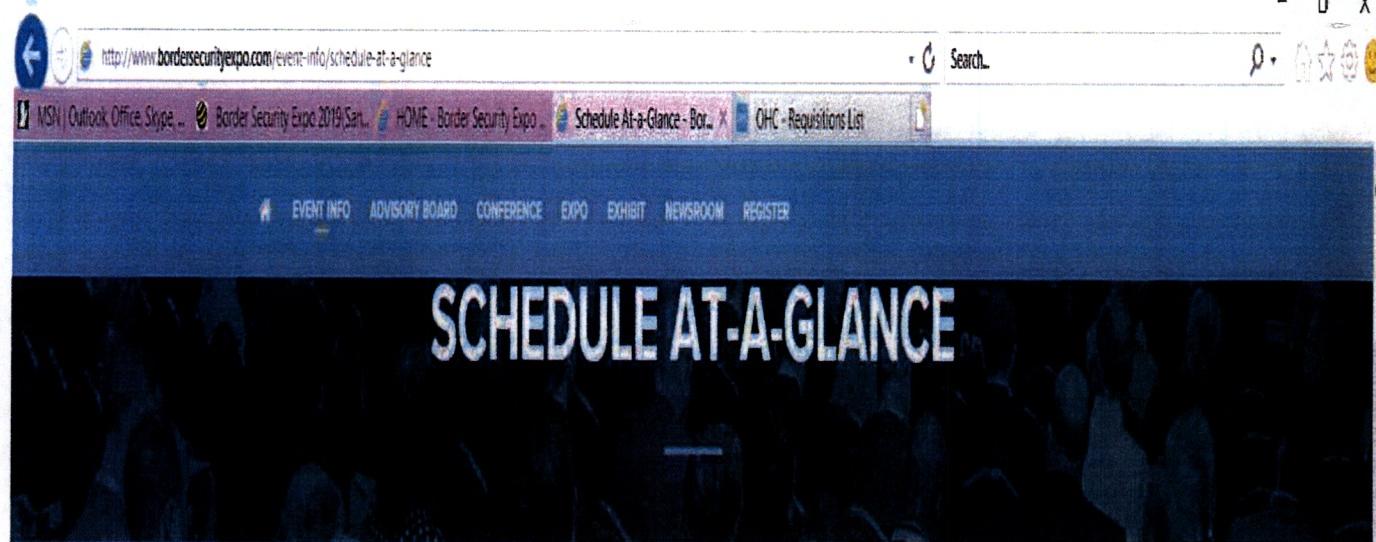
Parking Fee \$ 46.70

\$ _____

TOTAL \$ 46.70

TOTAL TRAVEL EXPENSES ADVANCED \$ 670.86

RECEIVED
2019 MAR - 7 PM 3:01
WEBB COUNTY BUSINESS OFFICE

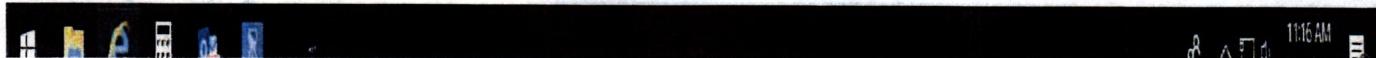


Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What is it? What isn't it? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
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3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"



Linda J. Santos

From: Hampton Confirmed <noreply@h4.hilton.com>
Sent: Tuesday, March 5, 2019 2:13 PM
To: Linda J. Santos
Subject: Your Mar-25-2019 Confirmation #85757185



NOE GONZALES, join Hilton Honors

sign up

NOE GONZALES,
see you on Mar-25-2019



Your Upcoming Stay

Hampton Inn San Antonio-Downtown (River Walk Area)
414 Bowie Street
San Antonio TX 78205, US
T: +1 2102258500

Confirmation #85757185

Mon

25

March

Check In: 4:00PM

Wed

27

March

Check Out: 11:00AM



Your Room Information

2 DBLS REFRIG/MICRO NOSMOK

Rooms: 1

Guests: 1 Adult

Plan ahead by making an Arrival Request.

Order Now

Your Rate Information

SEMI-FLEX

Rate Per Night:

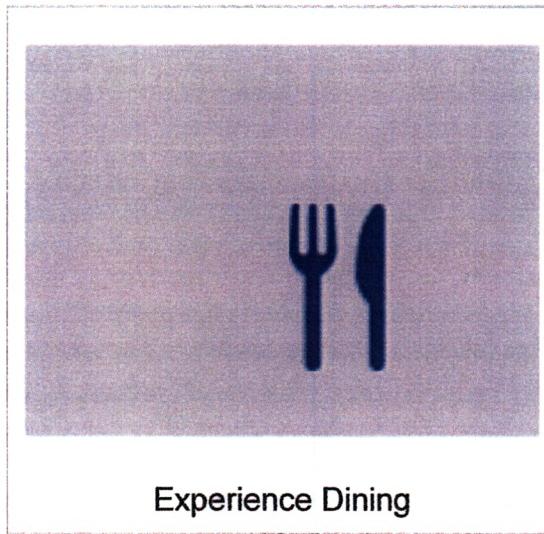
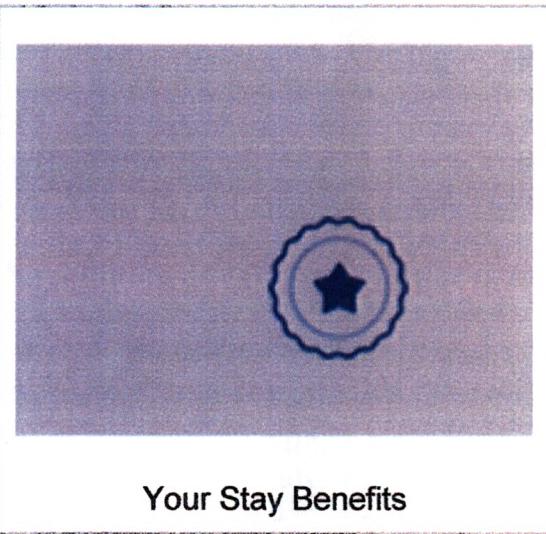
Mar-25-2019 - Mar-27-2019

239.04 USD

Total for Stay per Room Rate: **478.08 USD**

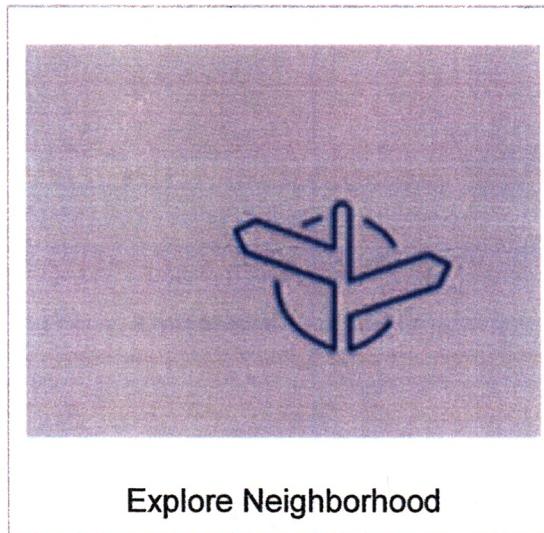
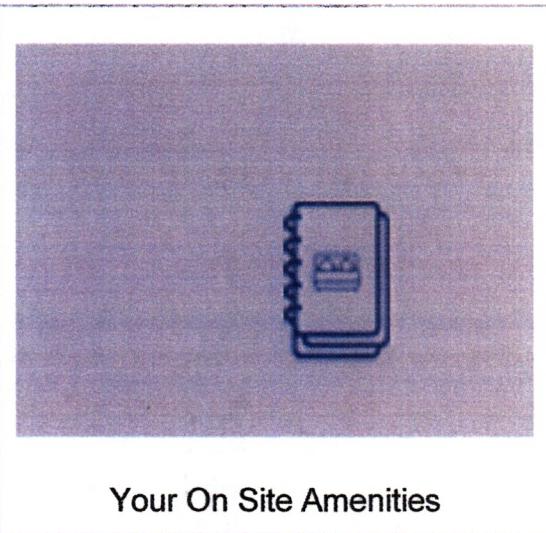
Taxes **80.08 USD**

Total for Stay **558.16 USD**



Your Stay Benefits

Experience Dining



Your On Site Amenities

Explore Neighborhood

Alamo

enterprise

National.

fill up on points

for a limited time, earn up to
7,500 bonus points on car rentals

GET STARTED

FIND NEW EXPERIENCES
DURING YOUR UPCOMING STAY

EXPLORE NOW

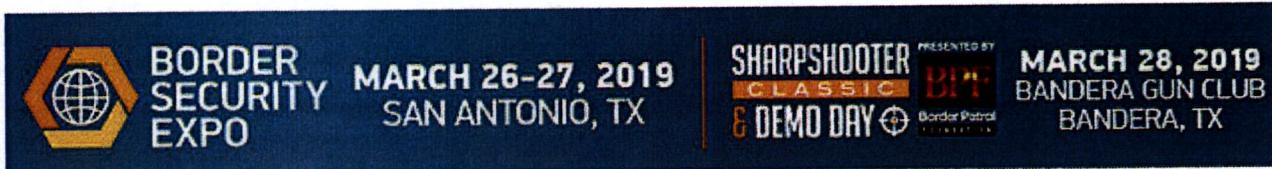
travel
that delivers



2K Points per stay +
10K your way. Repeat.
now through May 5

Linda J. Santos

From: BSE2019 Registration Center <BSE2019@badgeguys.com>
Sent: Tuesday, March 5, 2019 12:00 PM
To: Linda J. Santos; ljsantos@webbcountyx.gov
Subject: BSE2019 Registration Confirmation



**Registration Confirmation
INVOICE/RECEIPT**

Date: 03-05-2019
Confirmation Number: 1835

BADGE INFORMATION

Badge First Name: Noe
Badge Last Name: Gonzalez
Company/Organization: Webb County Sheriff's Office

REGISTRATION FEE(S)

Conference Pass \$124

DEMO DAY PARTICIPATION

Not planning to attend

Total Fees: \$124

Total Paid: \$0

Balance Due: \$124

BALANCE DUE

Balance must be paid in full to receive credentials on site. Make checks payable to **Clarion Events**. Mail check to arrive by January 24, 2019 to:

Border Security Registration
c/o An Ideal Partner LLC
3640 Roland Ave
Baltimore, MD 21211.

To pay by credit card, contact the Registration Center at 410-467-9234 or click [here](#).

CHANGES, click [here](#) to make a change to your registration or submit your change to Registration2019@AnIdealPartner.com.

CANCELLATIONS received in writing by March 1 will be refunded in full. Requests received between March 2 and March 8 will be refunded minus a \$75 administrative fee. After March 8, there are no refunds and registrants are obligated to pay 100% of the registration fee, regardless of attendance or payment status. Submit requests to Registration2019@AnIdealPartner.com.

REGISTRATION HOURS AND LOCATION will be posted in the [online conference schedule](#).

We look forward to your participation.

Border Security Expo
Clarion Events

WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

Division: Sheriff	Date: 2/27/2019	Date of Training/Conference: 3/26/2019 to 3/28/2019						
Name of Training/Conference Course: Border Security Expo 2019			Location: San Antonio, Tx.					
Immediate Supervisor Approval:			Date approved:					
TCLEOSE Mandated: Yes <u> </u> No <u> </u> Total Training Hours per Officer (if applicable) <u> </u>								
Deputy Roberto M. Castillo or Mayra Balboa Training Officer approval: <i>R.M.C.</i>					Date approved:			
Name of Employee	Meals	Hotel	Fuel	Registration fees	Taxi fees	Airline Fees	Parking fees	Total Cost
Martin Cuellar ✓	\$136.00 <i>66.7</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99
Federico Garza Jr. ✓	\$136.00 <i>66.7</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99
Juan J. Rendon ✓	\$136.00 <i>66.7</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99
Julio Gonzalez ✓	\$136.00 <i>66.7</i>	\$769.99 <i>58.11</i>		\$124.00				748.11 \$1,029.99
Policarpio Medellin Jr. ✓	\$136.00 <i>66.7</i>			\$124.00			46.70 \$70.05	236.70 \$330.04
Noe Gonzalez	\$136.00 <i>66.7</i>	\$769.99 <i>58.11</i>		\$124.00			46.70 \$70.05	121.70 \$1,100.04
					Total Estimated Cost: \$5,550.04 <i>4,024.05</i>			

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
	Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No		
Account No: <i>1001-001-3010-458000</i>	Account Bal:	YTD % used	
Account No:	Account Bal:	YTD % used	
FINANCE DIRECTOR APPROVAL: <i>WCBerCanca</i>	DATE: <i>35-19</i>		

FINAL DEPT APPROVAL

		FINANCE USE ONLY - DATE / TIME STAMP SECTION
Assistant Chief Juan J. Rendon	Date:	
<i>M. Cuellar Jr.</i> Sheriff Martin Cuellar, Jr.	Date:	

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments. Please review training courses /conferences online to plan accordingly. In addition, all training certifications received must be submitted to Training Division for filing and confirmation of credited hours. Thank you for your cooperation.



HAMPTON INN DOWNTOWN
414 BOWIE STREET
SAN ANTONIO, TX 78205
United States of America
TELEPHONE 210-225-8500 • FAX 210-225-8526
Reservations
www.hamptoninn.com or 1 800 HAMPTON

GONZALES, NOE
902 VICTORIA STREET
LAREDO TX 78041
UNITED STATES OF AMERICA

Room No: 310/SXPL
Arrival Date: 3/25/2019 4:03:00 PM
Departure Date: 3/27/2019 9:28:00 AM
Adult/Child: 1/0
Cashier ID: ERNESTO1109
Room Rate: 239.04
AL:
HH #
VAT #
Folio No/Che 628075 A

Confirmation Number: 85757185

HAMPTON INN DOWNTOWN 3/27/2019 9:28:00 AM

DATE	REF NO	DESCRIPTION	CHARGES
3/25/2019	2189412	Advance Deposit CASH	(\$608.44)
3/25/2019	2189482	PARKING	\$20.00
3/25/2019	2189482	SALES TAX- MISC	\$1.65
3/25/2019	2189483	GUEST ROOM	\$239.04
3/25/2019	2189483	STATE TAX	\$14.52
3/25/2019	2189483	CITY TAX	\$26.02
3/25/2019	2189483	SATPID FEE	\$2.99
3/26/2019	2189766	PARKING	\$20.00
3/26/2019	2189766	SALES TAX- MISC	\$1.65
3/26/2019	2189767	GUEST ROOM	\$239.04
3/26/2019	2189767	STATE TAX	\$14.52
3/26/2019	2189767	CITY TAX	\$26.02
3/26/2019	2189767	SATPID FEE	\$2.99
BALANCE			\$0.00



HAMPTON INN DOWNTOWN

414 BOWIE STREET

SAN ANTONIO, TX 78205

United States of America

TELEPHONE 210-225-8500 • FAX 210-225-8526

Reservations

www.hamptoninn.com or 1 800 HAMPTON

GONZALES, NOE

902 VICTORIA STREET

LAREDO TX 78041

UNITED STATES OF AMERICA

Room No: 310/SXPL
Arrival Date: 3/25/2019 4:03:00 PM
Departure Date: 3/27/2019 9:28:00 AM
Adult/Child: 1/0
Cashier ID: MATA0821
Room Rate: 239.04
AL:
HH #
VAT #
Folio No/Che 628075 A

Confirmation Number: 85757185

HAMPTON INN DOWNTOWN 4/1/2019 4:21:00 PM

DATE	REF NO	DESCRIPTION	CHARGES
3/25/2019	2189412	Advance Deposit CASH	(\$608.44)
3/25/2019	2189482	PARKING	\$20.00
3/25/2019	2189482	SALES TAX- MISC	\$1.65
3/25/2019	2189483	GUEST ROOM	\$239.04
3/25/2019	2189483	STATE TAX	\$14.52
3/25/2019	2189483	CITY TAX	\$26.02
3/25/2019	2189483	SATPID FEE	\$2.99
3/26/2019	2189766	PARKING	\$20.00
3/26/2019	2189766	SALES TAX- MISC	\$1.65
3/26/2019	2189767	GUEST ROOM	\$239.04
3/26/2019	2189767	STATE TAX	\$14.52
3/26/2019	2189767	CITY TAX	\$26.02
3/26/2019	2189767	SATPID FEE	\$2.99
BALANCE			\$0.00

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
03/06/2019	032519	TRAVEL TO SAN ANTONIO, TEXAS	670.86



Noe Gonzalez #S163

VENDOR NO: 25572

CHECK DATE: 03/13/2019

CHECK NO: 330413

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. (A)

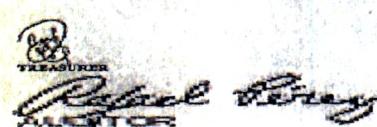
WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERCIAL BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
	03/13/2019		\$670.86	330413
PAY Six Hundred Seventy and 86/100 Dollars				
TO THE ORDER OF NOE GONZALEZ JR. 902 VICTORIA STREET LAREDO, TX 78040				

SO-6426874

LITHO BUSINESS FORMS, INC. (866) 727-7583

WNO-51000019 - 11C-VG

VOID AFTER 90 DAYS



#330413# 114909903# 0054404#



Webb County Sheriff's Office
Confirmation of Delivery

To: Angelica Morales

Date: 4/02/2019

Re: Travels to Closed

Urgent

For Review

To process

Please Reply

Note:

Martin Cuellar – RT#19-050– Travel Claim, and Hotel Receipt.
Federico Garza Jr. – RT#19-051–Travel Claim, and Hotel Receipt.
Juan J. Rendon – RT#19-052- Travel Claim, and Hotel Receipt.
Julio Gonzalez – RT#19-053 – Travel Claim, and Hotel Receipt.
Noe Gonzalez – RT#19-055 – Travel Claim, and Hotel Receipt.

Received by:

A handwritten signature consisting of stylized initials and a surname.

SIGNATURE

Alec Rodriguez

PRINTED NAME

4 / 2 / 19

DATE

4 : 15 pm

TIME

From: Linda J. Santos, Human Resource Clerk

Sheriff's Administration Building
www.webbcountytx.gov/sheriff.html
902 Victoria St. * Laredo Texas 78040
(956) 523-4504 * Fax (956) 523-5068

WEBB COUNTY
GENERAL PURPOSE REQUEST FOR PAYMENT

COPY

33.98 01

Total \$ **\$** **36.16**

Vendor No. 3392

Vendor Name: Juan J. Rendon

Address: 902 Victoria Street

City, State, Zip: Laredo, Tx. 78040

Description / Reimbursement for Hotel Difference

Purpose (Required) and Parking Fee



Request No. RT19-070

Date Prepared: 04/02/19

Prepared By: Linda Jo Santos

Phone No. 523-4504

Affidavit to The County Auditor

I am hereby presenting for payment expenses approved for my department for this fiscal year, which are absolutely necessary in the discharge of my official duties, and for which there is an available balance in my approved budget to this I certify. I also certify that this expenditure is proper appropriate, and that it complies with all federal, state and grant regulations and laws concerning the expenditure of these fund.

Department: SHERIFF'S OFFICE

Signature: M. Cuddeback

Name: Martin Cuellar

Title: Sheriff

Title: Sheriff

URGENT! Please distribute check by

Please **CALL**

ec'd						
view						
cct.					Out By	
C.G.					2nd Review	
					To R.P.	

Approved

Auditor

P2 332311

BUSINESS OFFICE
WEB COUNTY

2019 APR - 8 PM 1:26

RECEIVED



**Sheriff Martin Cuellar
Webb County Sheriff's Office**

902 Victoria St.
Laredo, TX 78041
(956) 523-4500 Main Number
(956) 523-5059 Fax Number

To: Business Office Department
From: Linda Jo Santos, Human Resource Clerk for WCSO
Date: April 2, 2019
Subject: Juan J. Rendon RT#19-052 Reimbursement for Hotel difference and Parking Fee

PP

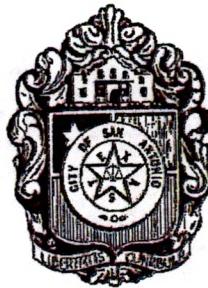
Juan J. Rendon was given advance for hotel in the amount of \$558.16 but he was bill \$566.32
needs difference paid to him In the \$8.16 and two parking fee in the amount of \$28.00. Total to
reimburse employee is \$36.16. ^{5.18 un}
^{33.98 un}

If you have any questions, feel free to contact me at (956) 523-4504. I thank you in advance for
your help on this matter.

Thanks

Expires **03/25
08:59 PM**

Payment Details
Machine #121266 CASH
03/25/19 04:59 PM \$ **10.00**



TICKET MUST BE DISPLAYED IN VEHICLE

PARKING RECEIPT

RECEIPT

License Plate Number

HJN5388

Expiration Date/Time

11:16 PM

MAR 26, 2019

Purchase Date/Time: 06:16pm Mar 26, 2019

Total Due: \$18.00 Rate: Up to 5hrs \$18

Total Paid: \$18.00 Pmt Type: CC (Swipe)

Ticket #: 06058041

URN #: 520119020047

Setting: 3rd St Lot

Arch Name: 3rd St Lot New

10.00
18.00
28.00

RECEIPT ****-6306, Visa

Auth #: 181073

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

RENDON, JUAN JOSE
4402 MARCELLA
LAREDO TX TX 78041
UNITED STATES OF AMERICA

417/KXTY
3/25/2019 4:02:00 PM
3/27/2019

1/0
239.04
R3X
912103504 BLUE

Rate Plan:
HH #:
AL:
Car:

Confirmation Number: 82349281

3/27/2019

3/25/2019	2189406	Advance Deposit CASH	(\$564.14)
3/25/2019	2189530	GUEST ROOM	\$239.04
3/25/2019	2189530	STATE TAX	\$14.52
3/25/2019	2189530	CITY TAX	\$26.02
3/25/2019	2189530	SATPID FEE	\$2.99
3/26/2019	2189817	GUEST ROOM	\$239.04
3/26/2019	2189817	STATE TAX	\$14.52
3/26/2019	2189817	CITY TAX	\$26.02
3/26/2019	2189817	SATPID FEE	\$2.99
3/27/2019	2189990	GUEST ROOM	\$1.00
3/27/2019	2189990	STATE TAX	\$0.06
3/27/2019	2189990	CITY TAX	\$0.11
3/27/2019	2189990	SATPID FEE	\$0.01
3/27/2019	2189991	ROOM ALLOWANCE	(\$1.12) >
3/27/2019	2189992	ROOM ALLOWANCE	(\$1.06)
		BALANCE	\$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit [Honors.com](#)

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

628073 A

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIMRequest Total \$ 624.16Prepared By: Linda Jo Santos
Request No.: RT19-052Budget Account Number:
1001-3010-001-458 000**EMPLOYEE INFORMATION:**Employee Name Juan J. Rendon
S.S. # Last 4 digits XXX-XX-5038
Address 902 Victoria Street, Laredo Tx
Invoice# (Auditor) 78041**TRAVEL DESCRIPTION (conference name, dates, and city):**Border Security Expo, 3/26/2019 to 3/28/2019
San Antonio, Tx**Note: Proof of Completed course must be remitted.**
Auditors Use: Proof Received Y or N**DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:***I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.*

Martin Cuellar

Printed Name & Signature of
Department Head M. CuellarDate 3/1/19**AFFIDAVIT / AUTHORIZATION BY CLAIMANT:***I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.*

Juan J. Rendon

Date 3/17/2019Printed Name & Signature of
Claimant Juan J. RendonDate 3/17/2019**FOR AUDITORS USE ONLY**

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

Form AP02 Revised 01/15

GENERAL QUESTIONS:Date and time of departure 3/25 2019 2:30 p.m.Date and time of return 3/28/2019 10:00 am. 3/27/2019Number of employees on trip 6Will airline flight be involved in this travel? NoWill a County vehicle be used in the travel? YesWill a rental vehicle be used in the travel? No

(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____

= _____ miles @ \$.575 or 57.5¢ mile =

TOTAL \$ 0.00**MEALS: Meals on non-overnight travel will be paid through Payroll**2 Breakfasts @ \$10 each = \$ 20.001 Lunches @ \$14 each = \$ 14.002 Dinners @ \$16 each = \$ 32.00TOTAL \$ 66.00**LODGING:**

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =TOTAL \$ 558.16**OTHER EXPENSES (receipts required):**

\$ _____

\$ _____

TOTAL \$ 0.00**TOTAL TRAVEL EXPENSES ADVANCED**\$ 624.16

Linda J. Santos

From: Amy Lee Capetillo
Sent: Thursday, April 11, 2019 11:21 AM
To: Linda J. Santos
Subject: Travel Difference GRP

Good Morning Linda,

Reviewing a GRP for Mr. Rendon's Difference from Travel to San Antonio on 03/25/2019. Question is account#1001-4070-001-458000 correct because on the original travel we used account#1001-3010-001-458000. Please confirm.

Thanks,

Amy L. Capetillo

Staff Auditor
Webb County Auditor's Office
(956)523-4593
acapetillo@webbcountytx.gov

DATE	INVOICE NO.	DESCRIPTION	NET AMOUNT
04/02/2019	032519DIFF	DIFF: TRAVEL TO SAN ANTONIO, TX	33.98

VENDOR NO: 3392

CHECK DATE: 04/19/2019

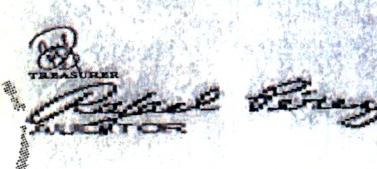
CHECK NO: 332311

THIS DOCUMENT HAS A PRISMATIC VOID PANTOGRAPH, MICROPRINTING, A COIN REACTIVE ARTIFICIAL WATERMARK AND THERMOCHROMATIC INK. (TM)

WEBB COUNTY TREASURER P.O. BOX 593 • LAREDO, TEXAS 78042-0593	DATE	COMMERCIAL BANK LAREDO, TEXAS 88-990-1149	AMOUNT	ACCOUNTS PAYABLE CHECK NO.
PAY Thirty-Three and 98/100 Dollars	04/19/2019	\$33.98	332311	
TO THE ORDER OF JUAN JOSE RENDON 902 VICTORIA ST. LAREDO, TX 78040				

VOID AFTER 90 DAYS

Litho Business Forms, Inc. (956) 727-7593
SD-842674



#332311# 1149099031 0054404#

WEBB COUNTY

GENERAL PURPOSE REQUEST FOR PAYMENT

COPY

Total \$ \$ 6.98
 Vendor No. 20592

Vendor Name: Federico Garza Jr.

Address: 902 Victoria Street

City, State, Zip: Laredo, Tx. 78040

Description / Reimbursement for Hotel Difference

Purpose (Required)



Request No. RT19-071
 Date Prepared: 04/02/19
 Prepared By: Linda Jo Santos
 Phone No. 523-4504

Affidavit to The County Auditor

I am hereby presenting for payment expenses approved for my department for this fiscal year, which are absolutely necessary in the discharge of my official duties, and for which there is an available balance in my approved budget to this I certify. I also certify that this expenditure is proper appropriate, and that it complies with all federal, state and grant regulations and laws concerning the expenditure of these fund.

Department: SHERIFF'S OFFICE

Signature: M. Cuellar

Name: Martin Cuellar

Title: Sheriff

Invoice Number	Amount	Invoice Date	Account Number	Auditor's Use
32719	\$ 6.98	03/27/19	1001-4070-001-458000	
punt	\$ 6.98			

URGENT! Please distribute check by _____

Please CALL _____

ec'd				
view				
cct.			Out By	
C.G.			2nd Review	
			To R.P.	

Approved

Auditor

332000
4/16/19



**Sheriff Martin Cuellar
Webb County Sheriff's Office**

902 Victoria St.
Laredo, TX 78041
(956) 523-4500 Main Number
(956) 523-5059 Fax Number

To: Business Office Department
From: Linda Jo Santos, Human Resource Clerk for WCSO 
Date: April 2, 2019
Subject: Federico Garza Jr. RT #19-051 Reimbursement for Hotel difference

Federico Garza Jr. was given advance for hotel in the amount of \$558.16 but he was billed \$564.14, please reimburse him the amount of \$6.98. I have attached a copy of hotel receipt he paid.

If you have any questions, feel free to contact me at (956) 523-4504. I thank you in advance for your help on this matter.

Thanks

414 BOWIE STREET
SAN ANTONIO, TX 78205
TELEPHONE 210-225-8500 • FAX 210-225-8526

GARZA, FRED
8801 MCPHERSON RD 3D
LAREDO TX 78045
UNITED STATES OF AMERICA

333/SXPL
3/25/2019 2:37:00 PM
3/27/2019

1/0
239.04

Rate Plan:
HH #
AL:
Car:

R3X
922108861 SILVER

Confirmation Number: 86019265

3/27/2019

3/25/2019	2189504	GUEST ROOM	\$239.04
3/25/2019	2189504	STATE TAX	\$14.52
3/25/2019	2189504	CITY TAX	\$26.02
3/25/2019	2189504	SATPID FEE	\$2.99
3/26/2019	2189789	GUEST ROOM	\$239.04
3/26/2019	2189789	STATE TAX	\$14.52
3/26/2019	2189789	CITY TAX	\$26.02
3/26/2019	2189789	SATPID FEE	\$2.99
3/27/2019	2189951	MC *4366	(\$565.14)
		BALANCE	\$0.00

Hilton Honors(R) stays are posted within 72 hours of checkout. To check your earnings or book your next stay at more than 5,000 hotels and resorts in 100 countries, please visit [Honors.com](#)

Hampton hotels are all over the world. Find us in Canada, Costa Rica, Ecuador, Germany, India, Mexico, Poland, Turkey, United Kingdom, and United States of America. Coming soon in Italy and Romania.

MC *4366

3/27/2019 628072 A

GARZA, FRED

02534B

-565.14

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 624.16
 Prepared By: Linda Jo Santos
 Request No.: RT19-050 051 OH
 Budget Account Number:
1001-3010-001-458000

EMPLOYEE INFORMATION:

Employee Name Federico Garza Jr.
 S.S. # Last 4 digits XXX-XX-5153
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 to 3/27/2019
San Antonio, Tx.

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of
Department Head M. Cuellar

Date 3/04/2019

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Federico Garza Jr. JG

3/04/2019

Printed Name & Signature of
Claimant

Date

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____

Form AP02 Revised 01/15

GENERAL QUESTIONS:

Date and time of departure 3/25/2019 2:30 p.m.
Date and time of return 3/27/2019 10:00 a.m.
Number of employees on trip 6

Will airline flight be involved in this travel? No
Will a County vehicle be used in the travel? Yes
Will a rental vehicle be used in the travel? No
(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
= _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

2	Breakfasts @ \$10 each =	\$ 20.00
1	Lunches @ \$14 each =	\$ 14.00
2	Dinners @ \$16 each =	\$ 32.00

TOTAL \$ 66.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

2 night(s) on trip @ 279.08 per night =

TOTAL \$ 558.16

OTHER EXPENSES (receipts required):

_____ \$ _____
_____ \$ _____

TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED \$ 624.16

330412 313

*RECEIVED
AUDITORS OFFICE
03/26/2019
10:00 AM*

WEBB COUNTY
GENERAL PURPOSE REQUEST FOR PAY. **COPY**

Total \$ \$ 30.00
Vendor No. 30165



Vendor Name: Roxanne Garcia

Address: 902 Victoria Street

City, State, Zip: Laredo, Tx. 78040

Description /
Reimburse Meals One day Travel
Payroll

Purpose (Required)

Request No. RT19-072
Date Prepared: 04/08/19
Prepared By: Linda Jo Santos
Phone No. 523-4504

Affidavit to The County Auditor

I am hereby presenting for payment expenses approved for my department for this fiscal year, which are absolutely necessary in the discharge of my official duties, and for which there is an available balance in my approved budget to this I certify. I also certify that this expenditure is proper appropriate, and that it complies with all federal, state and grant regulations and laws concerning the expenditure of these fund.

Department: SHERIFF'S OFFICE

Signature: M. Cuellar

Name: Martin Cuellar

Title: Sheriff

Invoice Number	Amount	Invoice Date	Account Number	Auditor's Use
32619	\$ 30.00	03/26/19	1001-4070-001-458000	
bunt	\$ 30.00			

URGENT! Please distribute check by _____

Please CALL _____

ec'd				
view				
cct.			Out By	
C.G.			2nd Review	
			To R.P.	

Approved

Auditor

WEBB COUNTY
BUSINESS OFFICE

2019 APR 16 PM 4:24

RECEIVED

Pd payee

5/3/19

104041



Sheriff Martin Cuellar
Webb County Sheriff's Office

902 Victoria St.
Laredo, TX 78040
(956) 523-4500 Main Number
(956) 523-5059 Fax Number
E-mail: martincuellar@webbcountytx.gov

TO: Webb County Auditor's Office

FROM: Sheriff Martin Cuellar

DATE: March 27, 2019 *M.C. S.A.T.*

RE: Legislative Meetings

Correctional Officers Mayra Balboa and Roxanne Garcia travelled to San Antonio, Texas, on Tuesday, March 26, 2019, to attend the Border Security Exposition and Conference. They left at 7:45 a.m. and returned at 7:00 p.m. (one-day travel).

Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What Is It? What Isn't It? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
2:30pm - 3:00pm	Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection
3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception In the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 30.00

Prepared By: Linda Jo Santos
 Request No.: RT19
 Budget Account Number:
1001-4070-001-458

EMPLOYEE INFORMATION:

Employee Name	Roxanne Garcia
S.S. # Last 4 digits	XXX-XX-5225
Address	902 Victoria Street, Laredo Tx
Invoice# (Auditor)	78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 , San Antonio Tx.

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar _____
 Printed Name & Signature of Department Head Date

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Roxanne Garcia _____
 Printed Name & Signature of Claimant Date

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____ Form AP02 Revised 01/15

GENERAL QUESTIONS:

Date and time of departure 3/26/2019 7:30 a.m.

Date and time of return 3/26/2019 7:00 p.m.

Number of employees on trip 2

Will airline flight be involved in this travel? No

Will a County vehicle be used in the travel? Yes

Will a rental vehicle be used in the travel? No

(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____

= _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

Breakfasts @ \$10 each = \$ 0.00

1 Lunches @ \$14 each = \$ 14.00

1 Dinners @ \$16 each = \$ 16.00

TOTAL \$ 30.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

_____ night(s) on trip @ _____ per night =

TOTAL \$ 0.00

OTHER EXPENSES (receipts required):

_____ \$ _____

_____ \$ _____

TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED

\$ 30.00

WEBB COUNTY
GENERAL PURPOSE REQUEST FOR PAYMENT

COPY

Total \$ \$ 30.00

Vendor No. 19407

Vendor Name: Mayra L. Balboa

Address: 902 Victoria Street

City, State, Zip: Laredo, Tx. 78040

Description / Reimburse Meals One day Travel

Payroll

Purpose (Required)



Request No. RT19-073

Date Prepared: 04/08/19

Prepared By: Linda Jo Santos

Phone No. 523-4504

Affidavit to The County Auditor

I am hereby presenting for payment expenses approved for my department for this fiscal year, which are absolutely necessary in the discharge of my official duties, and for which there is an available balance in my approved budget to this I certify. I also certify that this expenditure is proper appropriate, and that it complies with all federal, state and grant regulations and laws concerning the expenditure of these fund.

Department: SHERIFF'S OFFICE

Signature: M. Cuellar

Name: Martin Cuellar

Title: Sheriff

Invoice Number	Amount	Invoice Date	Account Number	Auditor's Use
32619	\$ 30.00	03/26/19	1001-4070-001-458000	
bunt	\$ 30.00			

URGENT! Please distribute check by _____

Please CALL _____

ec'd				
view				
cct.			Out By	
C.G.			2nd Review	
			To R.P.	

Approved

Auditor

Phyllis
5/3/19

104371



Sheriff Martin Cuellar
Webb County Sheriff's Office

902 Victoria St.
Laredo, TX 78040
(956) 523-4500 Main Number
(956) 523-5059 Fax Number
E-mail: martincuellar@webbcountytx.gov

TO: Webb County Auditor's Office

FROM: Sheriff Martin Cuellar

DATE: March 27, 2019 *M.C. Cuellar*

RE: Legislative Meetings

Correctional Officers Mayra Balboa and Roxanne Garcia travelled to San Antonio, Texas, on Tuesday, March 26, 2019, to attend the Border Security Exposition and Conference. They left at 7:45 a.m. and returned at 7:00 p.m. (one-day travel).

The screenshot shows a web browser window with the following details:

- Address Bar:** http://www.bordersecurityexpo.com/event-info/schedule-at-a-glance
- Toolbar:** Back, Forward, Stop, Refresh, Home, Search, Favorites, and other standard browser icons.
- Menu Bar:** MSN, Outlook, Office, Skype, Border Security Expo 2019 San..., HOME - Border Security Expo..., Schedule At-a-Glance - Bor..., OHC - Requisitions List.
- Page Content:**
 - SCHEDULE AT-A-GLANCE** (Large banner)
 - Navigation menu: EVENT INFO, ADVISORY BOARD, CONFERENCE, EXPO, EXHIBIT, NEWSROOM, REGISTER

Monday, March 25

10:00am - 5:00pm	Registration Open
1:15pm (Shotgun Start)	Border Patrol Foundation's 7th Annual Family Services Golf Tournament

Tuesday, March 26

7:30am - 5:00pm	Registration Open
8:30am - 9:15am	Opening Keynote: Ronald D. Vitiello, Deputy Director, U.S. Immigration and Customs Enforcement
9:15am - 10:15am	Plenary Panel: National Vetting Center: What Is It? What Isn't It? And How Will It Change the Way We Protect the Homeland?
10:15am - 10:45am	Plenary Keynote: Vice Admiral Scott Buschman, Atlantic Area Commander, U.S. Coast Guard
11:00am	Exhibit Hall Ribbon Cutting & Coffee Break in the Exhibit Hall
11:00am - 5:00pm	Exhibit Hall Open
12:30pm - 1:30pm	Networking Lunch in the Exhibit Hall
1:30pm - 2:30pm	Plenary Panel: Mass Migration and Unaccompanied Children: Financial and National Security Impacts
2:30pm - 3:00pm	Plenary Keynote: John P. Sanders, Chief Operating Officer, U.S. Customs and Border Protection
3:00pm - 4:00pm	Plenary Panel: Border: Wall - Ports - System(s) - Technology - Infrastructure - Integration - Modernization
4:00pm - 5:00pm	Networking Reception in the Exhibit Hall
6:00pm - 9:00pm	Border Patrol Foundation's 4th Annual "Night at the Alamo"

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM

Meals only



Request Total \$ 30.00
 Prepared By: Linda Jo Santos
 Request No.: RT19
 Budget Account Number:
1001-4070-001-458

EMPLOYEE INFORMATION:

Employee Name Mayra L. Balboa
 S.S. # Last 4 digits XXX-XX-8875
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 , San Antonio Tx.

Note: Proof of Completed course must be remitted.
 Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar _____
 Printed Name & Signature of Department Head _____ Date _____

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Mayra L. Balboa _____
 Printed Name & Signature of Claimant _____ Date _____

GENERAL QUESTIONS:

Date and time of departure	<u>3/26/2019 7:30 a.m.</u>
Date and time of return	<u>3/26/2019 7:00 p.m.</u>
Number of employees on trip	<u>2</u>
Will airline flight be involved in this travel?	<u>No</u>
Will a County vehicle be used in the travel?	<u>Yes</u>
Will a rental vehicle be used in the travel?	<u>No</u>
(if yes, a purchase order is required)	

MILEAGE (for private vehicles only):

Round trip from Laredo to	
=	miles @\$.575 or 57.5¢ mile =
	TOTAL \$ <u>0.00</u>

MEALS: Meals on non-overnight travel will be paid through Payroll

Breakfasts @ \$10 each	= \$ <u>0.00</u>
1 Lunches @ \$14 each	= \$ <u>14.00</u>
1 Dinners @ \$16 each	= \$ <u>16.00</u>

TOTAL \$ 30.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

night(s) on trip @ per night =

TOTAL \$ 0.00

OTHER EXPENSES (receipts required):

_____	\$ _____
_____	\$ _____
TOTAL \$ <u>0.00</u>	

TOTAL TRAVEL EXPENSES ADVANCED \$ 30.00

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

Date Received _____ Due Out _____ Assigned To _____ on _____

Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____ Form AP02 Revised 01/15

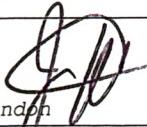
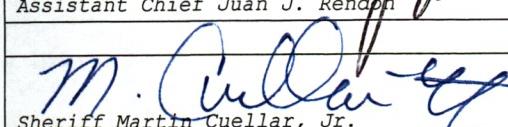
WEBB CO. SHERIFF'S OFFICE - TRAINING AUTHORIZATION & TRAVEL REQUEST FORM

Division: Sheriff	Date: 4/01/2019	Date of Training/Conference: 3/26/2019						
Name of Training/Conference Course: Border Security Expo			Location: San Antonio, Texas					
Immediate Supervisor Approval:			Date approved:					
TITLE Mandated: Yes <u> </u> No Total Training Hours per Officer (if applicable) _____			<i>Meals only</i>					
Deputy Roberto M. Castillo or Mayra Balboa Training Officer approval:					Date approved:			
Name of Employee	Meals	Hotel	Fuel	Registration fees	Airline fees	Taxi Fees	Parking fees	Total Cost
Mayra Balboa	\$30.00							\$30.00
Roxanne Garcia	\$30.00							\$30.00
					Total Estimated Cost:	\$60.00		

FINANCE USE ONLY

Date Reviewed:	Check funding source: <input type="checkbox"/> G/F <input type="checkbox"/> Grant <input type="checkbox"/> Fed forfeiture <input type="checkbox"/> State forfeiture <input type="checkbox"/> other		
Travel Complies with Grant Guidelines: <input type="checkbox"/> Yes <input type="checkbox"/> No			
Account No: 1001-4070-001-458000		Account Bal:	YTD % used
Account No:		Account Bal:	YTD % used
FINANCE DIRECTOR APPROVAL: <i>M. Balanga</i>		DATE: <i>4-1-19</i>	

FINAL DEPT APPROVAL

 Assistant Chief Juan J. Rendon		Date:	FINANCE USE ONLY - DATE / TIME STAMP SECTION
 Sheriff Martin Cuellar, Jr.		Date:	

Note to Divisions submitting Requests for Travel: All Travel Requests related items must be submitted to Finance within four (4) weeks before actual Training/Conference to allow sufficient time to prepare estimated costs, secure approvals, prepare and submit for processing to Auditors / Treasurers Office and Commissioner Court approval on release of payments.



Sheriff Martin Cuellar
Webb County Sheriff's Office

902 Victoria St.
Laredo, TX 78040
(956) 523-4500 Main Number
(956) 523-5059 Fax Number
E-mail: martincuellar@webbcountytx.gov

TO: Webb County Auditor's Office

FROM: Sheriff Martin Cuellar

DATE: March 27, 2019 *M.C. Cuellar*

RE: Legislative Meetings

Correctional Officers Mayra Balboa and Roxanne Garcia travelled to San Antonio, Texas, on Tuesday, March 26, 2019, to attend the Border Security Exposition and Conference. They left at 7:45 a.m. and returned at 7:00 p.m. (one-day travel).

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 30.00

Prepared By: Linda Jo Santos

Request No.: RT19

Budget Account Number:
1001-4070-001-458

EMPLOYEE INFORMATION:

Employee Name Mayra L. Balboa
S.S. # Last 4 digits XXX-XX-8875
Address 902 Victoria Street, Laredo Tx
Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 , San Antonio Tx.

Note: Proof of Completed course must be remitted.
Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar _____
Printed Name & Signature of Department Head _____ Date _____

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

I hereby certify that the information contained on this form is true and correct. I hereby agree to provide to the County Auditor documentation of the actual expenditures for the funds advanced pursuant to this form. I agree that I am personally responsible for any funds advanced but not properly expended for this travel. I agree to repay any funds for which I fail to provide documentation within five (5) business days of the date of return as given on this form. I authorize Webb County to deduct from my wages any expenses for which I have neither provided documentation nor repaid by that deadline.

Mayra L. Balboa _____
Printed Name & Signature of Claimant _____ Date _____

GENERAL QUESTIONS:

Date and time of departure 3/26/2019 7:30 a.m.

Date and time of return 3/26/2019 7:00 p.m.

Number of employees on trip 2

Will airline flight be involved in this travel? No

Will a County vehicle be used in the travel? Yes

Will a rental vehicle be used in the travel? No

(if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
= _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

Breakfasts @ \$10 each = \$ 0.00

1 Lunches @ \$14 each = \$ 14.00

1 Dinners @ \$16 each = \$ 16.00

TOTAL \$ 30.00

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

_____ night(s) on trip @ _____ per night =

TOTAL \$ 0.00

OTHER EXPENSES (receipts required):

_____ \$ _____
_____ \$ _____
TOTAL \$ 0.00

TOTAL TRAVEL EXPENSES ADVANCED

\$ 30.00

FOR AUDITORS USE ONLY

Approved by County Auditor _____ Date _____

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Dbl Check _____ on _____ to Acct _____ To RP _____ Rec'd by CG _____ Form AP02 Revised 01/15

Meals Only

WEBB COUNTY PAYROLL ADVANCE IN ANTICIPATION OF A TRAVEL CLAIM



Request Total \$ 30.00
 Prepared By: Linda Jo Santos
 Request No.: RT19
 Budget Account Number:
1001-4070-001-458

EMPLOYEE INFORMATION:

Employee Name Roxanne Garcia
 S.S. # Last 4 digits XXX-XX-5225
 Address 902 Victoria Street, Laredo Tx
 Invoice# (Auditor) 78041

TRAVEL DESCRIPTION (conference name, dates, and city):

Border Security Expo, 3/26/2019 , San Antonio Tx.

Note: Proof of Completed course must be remitted.

Auditors Use: Proof Received Y or N

DEPARTMENT HEAD AFFIDAVIT TO THE COUNTY AUDITOR:

I hereby certify that the travel described above is true, correct, and necessary to conduct official Webb County business. I further certify that this travel will not be reimbursed by any other entity.

Martin Cuellar

Printed Name & Signature of
Department Head

Date

AFFIDAVIT / AUTHORIZATION BY CLAIMANT:

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Roxanne Garcia

Printed Name & Signature of
Claimant

Date

GENERAL QUESTIONS:

Date and time of departure 3/26/2019 7:30 a.m.
 Date and time of return 3/26/2019 7:00 p.m.
 Number of employees on trip 2
 Will airline flight be involved in this travel? No
 Will a County vehicle be used in the travel? Yes
 Will a rental vehicle be used in the travel? No
 (if yes, a purchase order is required)

MILEAGE (for private vehicles only):

Round trip from Laredo to _____
 = _____ miles @ \$.575 or 57.5¢ mile =
TOTAL \$ 0.00

MEALS: Meals on non-overnight travel will be paid through Payroll

Breakfasts @ \$10 each =	<u>\$ 0.00</u>
1 Lunches @ \$14 each =	<u>\$ 14.00</u>
1 Dinners @ \$16 each =	<u>\$ 16.00</u>
 TOTAL <u>\$ 30.00</u>	

LODGING:

Lodging cost in excess of \$50 per night will be provided upon presentation of a written confirmation. A detailed lodging receipt must be presented to the County Auditor upon completion of the trip.

_____ night(s) on trip @ _____ per night =
TOTAL \$ 0.00

OTHER EXPENSES (receipts required):

_____	<u>\$ _____</u>
_____	<u>\$ _____</u>
 TOTAL <u>\$ 0.00</u>	

TOTAL TRAVEL EXPENSES ADVANCED \$ 30.00

FOR AUDITORS USE ONLY

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Form AP02 Revised 01/15



Sheriff Martin Cuellar
Webb County Sheriff's Office

902 Victoria St.
Laredo, TX 78040
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TO: Webb County Auditor's Office

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M C S/C

RE: Legislative Meetings

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